



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2019
Non-Profit Corporation

- Filing period: June 1 - June 30
→ Filing Fee: \$20.00
→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

FILED

JUN 06 2019

BY 7046

1. Entry ID Number <u>26656</u>		2. Exact name of the Corporation <u>EAST WARREN Rod + Gun Club</u>	
3. State of Incorporation <u>Rhode Island</u>		5. Brief description of the character of business conducted in Rhode Island <u>the safe handling and shooting of firearms with classes and instruction</u>	
4. NAICS Code <u>713990</u>			
6. Principal Office Address <u>24 Long Lane</u> <u>(MAIL P.O. Box 12)</u>		City <u>WARREN</u>	State <u>RI</u> Zip <u>02885</u>
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name <u>Phil LaPointe</u>		Vice-President Name <u>John Soares</u>	
Street Address <u>136 Cypress Ave</u>		Street Address <u>777 Pearse Rd</u>	
City <u>Tiverton</u>	State <u>RI</u>	City <u>SWANSEA</u>	State <u>MA</u>
Zip <u>02878</u>		Zip <u>02777</u>	
Secretary Name <u>Everett Manchester</u>		Treasurer Name <u>John LONGELLO</u>	
Street Address <u>2734 Main Rd</u>		Street Address <u>51 Harris Ave</u>	
City <u>Tiverton</u>	State <u>RI</u>	City <u>WARREN</u>	State <u>RI</u>
Zip <u>02878</u>		Zip <u>02885</u>	
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>			
Director Name <u>John Achilli</u>		Director Name <u>Brett Keightley</u>	
Street Address <u>36 Cliff Dr.</u>		Street Address <u>5 Wildacre Ln</u>	
City <u>Bristol</u>	State <u>RI</u>	City <u>BARRINGTON</u>	State <u>RI</u>
Zip <u>02809</u>		Zip <u>02806</u>	
Director Name <u>John Dyson</u>		Director Name <u>Brian Remy</u>	
Street Address <u>771 Beekley St.</u>		Street Address <u>8 Laurel Lane</u>	
City <u>Beekley</u>	State <u>MA</u>	City <u>WARREN</u>	State <u>RI</u>
Zip <u>02779</u>		Zip <u>02885</u>	
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.			
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.			
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>			
Name of Officer/Authorized Representative <u>John LONGELLO Treasurer</u>			Date <u>June 5, 2019</u>
Signature of Officer/Authorized Representative <u>John Longello</u>			