



**State of Rhode Island and Providence Plantations  
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Non-Profit Corporation  
Annual Report**

*Filing Period: June 1 - June 30*

*In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2019

**1. Corporate ID No.** 000030373

**2. Name of Corporation** PORTSMOUTH-PATRIOTS YOUTH FOOTBALL ASSOCIATION

**3. State of Incorporation**

State: RI

**ARTICLE III**

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

**4. Corporate Address in Rhode Island**

No. and Street: P.O. BOX 793  
City or Town: PORTSMOUTH State: RI Zip: 02871 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:  
City or Town: State: Zip: Country:

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

YOUTH FOOTBALL ORGANIZATION.

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**

**THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	JOHN HURD	48 KERR ROAD PORTSMOUTH, RI 02871 USA
TREASURER	ANDRE KHALFAYAN	196 KING CHARLES DR PORTSMOUTH, RI 02871 USA
SECRETARY	TARA MELLO	60 SWEET FARM ROAD PORTSMOUTH, RI 02871 USA
VICE PRESIDENT	THOMAS ROCCO	14 HAMMEL COURT PORTSMOUTH, RI 02871 USA
DIRECTOR	JULIE SWEENEY	11 EASTON AVENUE PORTSMOUTH, RI 02871 USA
DIRECTOR	JENNIFER CONHEENY	67 LAMBIE CIRCLE PORTSMOUTH, RI 02871 USA
DIRECTOR	NORAH DALY	8 PROSPECT FARM RD PORTSMOUTH, RI 02871 USA
DIRECTOR	MATT CORREIA	36 CLEARVIEW AVE PORTSMOUTH, RI 02871 USA
DIRECTOR	RYAN MONIZ	11 BAY ST JAMESTOWN, RI 02835 USA
DIRECTOR	NICOLE BARTLETT	45 GREYLOCK DR PORTSMOUTH, RI 02871 USA
DIRECTOR	CARLENE MOHR	32 SUNSET AVE PORTSMOUTH, RI 02871 USA
DIRECTOR	MELANIE PACHECO	74 STAFFORD RD TIVERTON, RI 02878 USA
DIRECTOR	NICOLE QUIN FARIA	81 POTOMAC RD PORTSMOUTH, RI 02871 USA
DIRECTOR	CHRISTOPHER BICHO	96 DIANNE AVE PORTSMOUTH, RI 02871 USA
DIRECTOR	TARA THOMAS	200 HILLTOP DRIVE PORTSMOUTH , RI 02871 USA
DIRECTOR	JILL WATSON	57 RAYMOND DR PORTSMOUTH, RI 02871 USA
DIRECTOR	BEN HURD	33 LOWELL DR PORTSMOUTH, RI 02871 USA
DIRECTOR	STEVE SEBOLT	19 QUAIL RD PORTSMOUTH, RI 02871 USA
DIRECTOR	SARAH VANDERVEER LUI	33 VAN ZANDT AVE #6 NEWPORT , RI 02840 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER**  
**Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

ERIC P. CHAPPELL, ESQ. 171 CHASE ROAD P.O. BOX 8 PORTSMOUTH , RI 02871

**9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.**

**Signed this 13 Day of June, 2019 at 10:44:19 AM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or**

*acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By SARAH VANDERVEER LUI  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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