| State of Rhode Island and Providence Plantations Fee: \$20.00 Office of the Secretary of State | | | |
|---|--|--|--|
| 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. 001660596 | | | |
| 2. Name of Corporation Woodland BMX Parents' Organization | | | |
| 3. State of Incorporation | | | |
| State: <u>RI</u> | | | |
| 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 <u>click here.</u> | | | |
| NAICS Code 6 | | | |
| <u>711211</u> | | | |
| 4. Corporate Address in Rhode Island | | | |
| No. and Street: 184 RAILROAD AVE | | | |
| City or Town: SAUNDERSTOWN State: RI Zip: 02874 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 | | | |
| TO CONDUCT SUPERVISE AND MANAGE BICYCLE MOTOCROSS RACES IN ACCORDANCE WITH THE RULES ESTAB LISHED BY THE AMERICAN BICYCLE ASSOCIATION USA BMX | | | |
| 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Incorporator is no longer applicable; please delete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. 7-6-23

| Title | Individual Name | Address |
|----------|-----------------------------|---|
| | First, Middle, Last, Suffix | Address, City or Town, State, Zip Code, Country |
| DIRECTOR | DAVID STRATE, JR. | 184 RAILROAD AVENUE SAUNDERSTOWN, RI 02874 USA |
| DIRECTOR | DAVID POOLE | 170 MACARTHUR BOULEVARD COVENTRY, RI 02816 USA |
| DIRECTOR | WALTER COLE JR | 193 COLVINTOWN RD COVENTRY, RI 02816 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

DAVID STRATE, JR 184 RAILROAD AVENUE SAUNDERSTOWN, RI 02874

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

Signed this 16 Day of September, 2019 at 7:52:58 PM 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 <u>DAVID STRATE</u> Signature of Authorized Person

Signature of Authorized Pers

Form No. 631 Revised 09/07

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