



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.** 001688533

**2. Name of Corporation** Atlantic Shark Institute, Inc.

**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

6

999999

**4. Corporate Address in Rhode Island**

No. and Street: 9 MAUDE AVENUE

City or Town: COVENTRY

State: RI

Zip: 02816

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 RESEARCH AND STUDIES ON ALL SPECIES OF SHARKS AND ANY OTHER LAWFUL PURPOSE

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
INCORPORATOR	PAUL N. LAPROCINA, JR.	662 ROSE HILL ROAD WAKEFIELD, RI 02886 USA
DIRECTOR	JOSE L. ROMEIRO	9 MAUDE AVENUE COVENTRY, RI 02816 USA
DIRECTOR	PAUL N. LAPROCINA JR.	662 ROSE HILL ROAD WAKEFIELD, RI 02879 USA
DIRECTOR	JON F. DODD	61 INKBERRY DRIVE SOUTH KINGSTOWN, RI 02879 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**

MICHAEL J. LEPIZZERA, JR., ESQ. 117 METRO CENTER BOULEVARD SUITE 2001 WARWICK , RI  
02886

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

**Signed this 22 Day of November, 2019 at 4:31:14 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 PAUL N. LAPROCINA, JR.  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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