



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

Annual Report for the year: 2018
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.

STAMP
 2019 NOV 25 PM 1:07
 SECRETARY OF STATE
 CORPORATIONS DIV

1. Entity ID Number 000029559		2. Exact name of the Corporation Washington County Columbus Club			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island Mens Catholic organization, conduct council meetings, charity affairs social gatherings			
4. NAICS Code 813110 - Religious Organization					
6. Principal Office Address 1265 Tower Hill Road			City North Kingstown	State RI	Zip 02852
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Thomas J. Mulligan		Vice-President Name William Crandall			
Street Address 44 Juniper Drive		Street Address 115 Gooseberry Road			
City North Kingstown	State RI	Zip 02852	City Charlestown	State RI	Zip 02879
Secretary Name Richard DIMaria		Treasurer Name Michael Smith			
Street Address 150 Juniper Drive		Street Address 126 Hammet Road			
City North Kingstown	State RI	Zip 02852	City Coventry	State RI	Zip 02908-3329
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input checked="" type="checkbox"/>					
Director Name Kenneth Connors		Director Name Robert J. Moniz			
Street Address 10 Seaview Avenue		Street Address 242 Widow Sweets Road			
City North Kingstown	State RI	Zip 02852	City Exeter	State RI	Zip 02822
Director Name Arnold C Mohring		Director Name Guido Demelis			
Street Address 135 King Philip Drive		Street Address 28 Cedar Ridge			
City North Kingstown	State RI	Zip 02852	City Coventry	State RI	Zip 02816
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 Thomas J. Mulligan				Date 11/21/2019	
Signature of Officer/Authorized Representative <i>Thomas J. Mulligan</i>				SIGN DOCUMENT HERE	

FILED

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

NOV 25 2019 1:08
 ICE NPW49

2017 Washington County Columbus Club – Directors

ENTITY IDENTIFICATION #: 000029559

Addition to Form 631

5. Kevin Keathing
185 Glenwood Drive
North Kingstown, RI 02852-1426

6. Jason Masterson
183 Georgia Ave
North Kingstown, RI 02852-6008