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. 001672082			
2. Name of Corporation Aquidneck Cyclocross			
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			
<u>624110</u>			
4. Corporate Address in Rhode Island			
No. and Street: 11 ELLERY ROAD			
City or Town: NEWPORT State: RI Zip: 02840 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 PROMOTE THE SPORT OF CYCLOCROSS ON AQUIDNECK ISLAND AND			
<u>THROUGHOUT THE STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS. TO</u> PROMOTE CYCLOCROSS-STYLE BICYCLE RIDING AS A HEALTHY AND SAFE			
OUTDOOR ACTIVITY FOR CHILDREN OF ALL AGES.			
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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	STUART MIES STREULI	11 ELLERY RD. NEWPORT, RI 02840 USA	
DIRECTOR	LARS SVENSTRUP	31 BAY ST. PORTSMOUTH, RI 02871 USA	
DIRECTOR	MEGHAN JEANS	18 BRIGHTMAN AVE. TIVERTON, RI 02878 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

STUART STREULI 11 ELLERY ROAD NEWPORT, RI 02840

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

Signed this 9 Day of December, 2019 at 7:18:00 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>STUART STREULI</u> Signature of Authorized Person

Form No. 631 Revised 09/07

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