



Department of State - Business Services Division

**FILED  
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MAY 21 2020

BY 12500

Annual Report for the year: **2020**

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.

1. Entity ID Number <b>000027118</b>		2. Exact name of the Corporation <b>Federated Rhode Island Sportsmen's Clubs</b>			
3. State of Incorporation <b>Rhode Island</b>		5. Brief description of the character of business conducted in Rhode Island <b>Establishing and maintaining suitable control of wildlife and habitat for procreation of fishing, hunting and the shooting sports in Rhode Island.</b>			
4. NAICS Code <b>813319 - 7</b>					
6. Principal Office Address <b>62 Hagerstown Rd</b>			City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>
7. List ALL officers (names and addresses). Check the box to indicate an attachment <input type="checkbox"/>					
President Name <b>John Carnevale</b>			Vice-President Name <b>Carlos Sousa</b>		
Street Address <b>202 Simmonsville Ave</b>			Street Address <b>3980 Mendon Rd</b>		
City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>	City <b>Cumberland</b>	State <b>RI</b>	Zip <b>02864</b>
Secretary Name <b>Nicola Grasso</b>			Treasurer Name <b>Jonathan Hirons</b>		
Street Address <b>39 Marne St.</b>			Street Address <b>62 Hagerstown Rd.</b>		
City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>	City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name <b>Ed Smith</b>			Director Name <b>Jonathan Hirons</b>		
Street Address <b>6 Jade St,</b>			Street Address <b>62 Hagerstown Rd</b>		
City <b>Coventry</b>	State <b>RI</b>	Zip <b>02816</b>	City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>
Director Name <b>Al Mawhiney</b>			Director Name <b>Nicola Grasso</b>		
Street Address <b>167 Bishop Hill Rd.</b>			Street Address <b>39 Marne St.</b>		
City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>	City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>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.</b>					
<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 <b>Jonathan G Hirons - Treasurer</b>				Date <b>5/19/2020</b>	
Signature of Officer/Authorized Representative 				SIGN DOCUMENT HERE	

MAIL TO:  
 Division of Business Services  
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 Website: www.sos.ri.gov