



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

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.

FILED
STAMP
MAY 27 2020
BY 1265
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1. Entity ID Number 791418		2. Exact name of the Corporation JWK Hockey, Inc.			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island Proceeds promote financial aid to families for youth hockey and donations to special olympics.			
4. NAICS Code 711211					
6. Principal Office Address 80 Houston Avenue			City Narragansett	State RI	Zip 02882
7. List ALL officers (names and addresses). Check the box to indicate an attachment <input type="checkbox"/>					
President Name JoAnne C. Kennedy			Vice-President Name		
Street Address 80 Houston Avenue			Street Address		
City Narragansett	State RI	Zip 02882	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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 JoAnne C. Kennedy			Director Name Kimberly Kennedy		
Street Address 80 Houston Avenue			Street Address 706 Silver Street		
City Narragansett	State RI	Zip 02882	City La Jolia	State CA	Zip 92037
Director Name Kristen Kennedy			Director Name John P. Conaty		
Street Address 6223 Brooklyn Ave. NE			Street Address 90 Willett Avenue		
City Seattle	State WA	Zip 98115	City Riverside	State RI	Zip 02915
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.					
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.					
Name of Officer/Authorized Representative JoAnne C. Kennedy				Date 5-20-20	
Signature of Officer/Authorized Representative <i>JoAnne C. Kennedy</i>				SIGN DOCUMENT HERE	

MAIL TO:

Division of Business Services
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