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: 2020			
1. Corporate ID No. 000121147			
2. Name of Corporation <u>NORTH PROVIDENCE BOYS & GIRLS CLUB ALUMNI</u> <u>ASSOCIATION</u>			
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 624110			
4. Corporate Address in Rhode Island			
No. and Street:40 MURIEL AVENUECity or Town:NORTH PROVIDENCEState: RIZip: 02911Country: USA			
5. Foreign Corporation. Enter Principal Office Address			
No. and Street: <u>33 HOMEWOOD AVE</u>			
City or Town: <u>NORTH PROVIDENCE</u> State: <u>RI</u> Zip: <u>02911-2906</u> Country: <u>USA</u>			
6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island			
TO PROVIDE BOTH VOLUNTEER AND FINANCIAL SUPPORT			
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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete			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
PRESIDENT	FRED LACOMB	40 MURIEL AVENUE NORTH PROVIDENCE, RI 02911 USA
TREASURER	DAVID RICCI	17 FORESTWOOD DR SMITHFIELD, RI 02917 US
SECRETARY	KAREN LOMAX	1363 SMITH ST, APT 402 NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	JOSEPH SIMEONE	42 ROOSEVELT DR BRISTOL, RI 02809 USA
DIRECTOR	CONNIE MCCLURG	33 HOMEWOOD AVE NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	JAMES FITZGERALD	4 ASHBROOK RUN EAST GREENWICH, RI 02818 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

CONNIE M. MCCLURG 33 HOMEWOOD AVENUE NORTH PROVIDENCE, RI 02911

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

Signed this 5 Day of July, 2020 at 11:13:44 AM 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 KAREN LOMAX

Signature of Authorized Person

Form No. 631 Revised 09/07

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