



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

Annual Report for the year: **2020**
Non-Profit Corporation

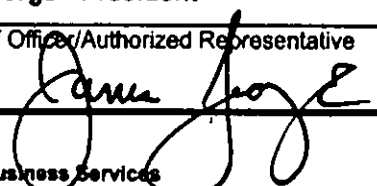
- Filing period: June 1 - June 30
→ Filing Fee: \$20.00
→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

FILED STAMP

JUL 16 2020

BY

1014 OS

| | | | | | |
|--|-----------------|---|--|-----------------------|---------------------|
| 1. Entity ID Number 26151 | | 2. Exact name of the Corporation Sigma Chi URI Alumni Corporation | | | |
| 3. State of Incorporation Rhode Island | | 5. Brief description of the character of business conducted in Rhode Island Operation and maintenance of fraternity house at 13 Fraternity Circle, Kingston, RI | | | |
| 4. NAICS Code 611110 - Elementary and Se | | | | | |
| 6. Principal Office Address 2 Williams Street | | | City Providence | State RI | Zip 02903 |
| 7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/> | | | | | |
| President Name James George | | | Vice-President Name Tom Murphy | | |
| Street Address 27 Isabelle Drive | | | Street Address 25 Highland Drive | | |
| City Narragansett | State RI | Zip 02882 | City Westerly | State RI | Zip 02891 |
| Secretary Name Tim Marran | | | Treasurer Name Mike Murray | | |
| Street Address 1 Secluded Drive | | | Street Address 26 Eastwick Road | | |
| City Wakefield | State RI | Zip 02879 | City North Kingstown | State RI | Zip 02852 |
| 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 Charles Harrington | | | Director Name Richard Jordan | | |
| Street Address 45 Brassie Way | | | Street Address 43 Hybrid Drive | | |
| City North Reading | State MA | Zip 01864 | City Cranston | State RI | Zip 02920 |
| Director Name Richard Mayoh | | | Director Name Dale Harrington | | |
| Street Address P.O. Box 159 | | | Street Address 81 Buena Vista Drive | | |
| City Conover | State WI | Zip 54519 | City North Kingstown | State RI | Zip 02852 |
| 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 James George - President | | | | Date 7/3/20 | |
| Signature of Officer/Authorized Representative  | | | | SIGN DOCUMENT HERE | |

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