



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.

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 BUS SVCS DIV

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1. Entity ID Number 30294		2. Exact name of the Corporation Tri Town Rod and Gun Club			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Pistol and Rifle Shooting Related Sportsmans Activities			
4. NAICS Code 813990 - Other Similar Orga					
6. Principal Office Address 88 Sandy Brook Rd		City North Scituate	State RI	Zip 02857	
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Vincent Ranaldi		Vice-President Name James Biagioni			
Street Address 2 Appian Way		Street Address 128 Foster Center Road			
City Johnston	State RI	Zip 02919	City Foster	State RI	Zip 02825
Secretary Name David Hughes		Treasurer Name Patricia Moreau			
Street Address 88 Sandy Brood Road		Street Address 157 Central Pike			
City North Scituate	State RI	Zip 02857	City Foster	State RI	Zip 02825
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 James Biagioni		Director Name Robert Depalo			
Street Address 128 Foster Center Road		Street Address 45 Plainfield Pike			
City Foster	State RI	Zip 02825	City Foster	State RI	Zip 02825
Director Name Dennis Brunette		Director Name			
Street Address 3274 Flat River Road		Street Address			
City Coventry	State RI	Zip 02816	City	State	Zip
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 David Hughes Club Secretary				Date 07/17/2020	
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

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