

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

## NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: Jane 1 - June 30 Filing Fee: \$20.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 117693 Pawtucket Youth Soccer Association (PYSA) 3. State of Incorporation 4. Corporate address in Rhode Island -Street Address RHODE ISLAND P.O. BOX 3125 PANTUCKET 02861-5. Foreign corporation: Erser principal office address State City Zip 6. Brief Description of the character of the affairs which are natually conducted in Rhode Island TO PROMOTE AND DEVELOP INSTRUCTIONAL SOCCER IN A ROW-COMPETITIVE MARKER. 7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Dennis Plynn Thomas Brown Street Address Street Address 139 Moorefield St .84 Webster St City State Tφ City State Providence RI 02909 Pawtucket RI 02861 Secretary Name Treasurer Name Kimberly Dooley Alessandra Flynn Street Address Street Address 51 Edgemere Rd .139 Moorefield St City Shake City State **Pawtucket** RI 02861 Providence 02909 RI 8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" ROX FOR ATTACHMENT) [] FILL IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (BHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3) RIGL 74 Director Name Director Name Joe Dutra S Teresa Barros Street Address Street Address 5 Stearns St 501 Walcott St Cin Sore Zio City Verte **Pawtucket** RI 02861 **Pawtucket** RI Director Name Director Name Bllen Silvia Street Address ·Street Address 108 Maplecrest Drive City T.iv Sate Zπ **Pawtucket** RI 02861 9. REGISTERED AGENT IN RHODE ISLAND DO NOT ALTER. Changes require filing of Form 641 RLGL 7-413/7-78 Address Robert A Morrill Mrs Color Address Cirr 126 Crescent Rd د بر المراجع ا GOODSON. This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, \*117693 DNP 02/21/05/04/2:48CPM and that all statements contained herein are true and correct. File Date MAR 03 2005 Check No. Dennis Flynn Print or Type Name of Officer **President** (MJQ) FOR SECRETARY OF STATE USE ONLY Tule of Officer Form 631 Rev. 6/02



1. Corporate ID No.

3. State of Incorporation

**RHODE ISLAND** 

117693

President Name

Street Address

Secretary Name

Cirv

BARBANA

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

2. Name of Corporation

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6. Brief Description of the character of the affairs which are actually conducted in Rhode Island.

Pawtucket Youth Soccer Association (PYSA)

BOX

TO PROMOTE AND DEVELOP INSTRUCTIONAL SOCCER IN A NON-COMPETITIVE MANNER.

4. Corporate address in Rhode Island - Street Address

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

STREET

(FORM MUST BE TYPED OR PRINTED IN BLACK)

5. Foreign corporation. Enter principal office address

DAVID HEDENBURG

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

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Zip

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Office of the Secretary of State

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

02861

0286 1

City

Vice President Name

Street Address

JAMES

7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name	OF THE DIRECTOR TORS OF A DOMES	S ("X" BOX FOR ATT TIC (PHODE ISLAND	ACHMENT) [] FILL IN TE D) CORPORATION SHALL	LE SPACES BEFORE I NOT BE LESS THAN	USING ATTACHMENTS NTHREE (3). R.I.G.L. 7-6-23
Director Name	. •	·			
THOmas M	ancini.		Director Name		<u>, , , , , , , , , , , , , , , , , , , </u>
THOMAS IN		3	COLLEEN LYN		
itreet Address	0.0	6 (1) j	Street Address	- / /	
49 KENMO			162 ARC	H 51	
PAWT	State Z.	0286 /	PANT.	State R.I	7.ip 82861
Director Name - BRIAN BE	665		Director Name		
LOSE MENE	RO		Street Address		
PAUTUCKO	State	Zip 02861	City	State	Zip
. REGISTERED AGENT IN I	RHODE ISLAND - D	ONOT ALTER - Char	nges require filling of Form	n 641 - R.I.G.L. 7-6-13	7/7-6-78
Igent Name			Address		
ROBERT_A_MORRILL					
Address			City	2	Zip .
126 CRESCENT ROAD			PAWTUCKET		02861-
this report must be signed  * 1 1  File Date NOV 05  By	2003 Com	President, Vice Pr	Under penalty of pe this report, including	rjury, I declare and affirm g any accompanying schools contained herein are to  MERCIEN  MERCIEN	n that I have examined edules and statements,
FOR SECRETARY OF STATE U	ISE ONLY	•	Title of Officer	A	Form 631 Rev. 6/



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

## **NON-PROFIT CORPORATION**

Сс	orporate ID Number <u>DNP-117693</u>	Annual Report for the year 2002
1.	The name of the corporation is Pawtucket	Youth Soccer Association (PYSA)
2. 3.		s of which it is incorporated is RHODE ISLAND corporation in this state is 126 CRESCENT ROAD PAWTLICKET, RI
4.	and the name of its registered agent in this The character of the affairs which it is actual	state at that address is ROBERT A. MORRILL ally conducting in Rhode Island, briefly stated, is To Romote
5		TIGHAL DOCKER IN A NON Competitive Manual rincipal office in the state or other jurisdiction under the laws of which it is
6.	Corporate address in Rhode Island	BOX 3125 PAWTUCKET RI 02861
7.		officers: (In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the sland) corporation shall not be less than three (3).)  ADDRESS
<del></del>	on 0	
7	Real Broths Director  Real Broths Director	210 Chandle Con- Paint RX
7	Director Director	38 (Ari ST PANTUCET TO
4	President	126 CIZESCENIT RO TAWTUCKET PCL
1	VI's Flues Vice-President	
Z	Villiam Messin Treasurer	19 PAUL STREET PAWTICKET RI
Da	ated:	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.
	* 1 1 7 6 9 3 *	Exect Name of Corporation
	Date: U·[1-03	Title transcont
The	ck No.:738	(Report must be signed by an officer)
Зу:	1 Usak	Form No. 631 Revised 5/98