



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

FILED

JAN 20 2021

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BY

ANNUAL REPORT FOR THE YEAR 2021

Corporation

- Filing Period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1

1. Corporate ID No. 000537630		2. Name of Corporation Alpine Ski & Sports, Inc.			
3. Street Address Principal Business Office 105 Chestnut Street			City Warwick	State RI	Zip 02888
4. NAICS Code U55110		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island RETAIL SKI, SNOWBOARD, SPORTS EQUIPMENT AND APPAREL SALES					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Richard H. Sceery, Jr.			Vice President Name Mary Frances Gould		
Street Address 105 Chestnut Street			Street Address 105 Chestnut Street		
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 02888
Secretary Name Richard H. Sceery, Jr.			Treasurer Name Mary Frances Gould		
Street Address 105 Chestnut Street			Street Address 105 Chestnut Street		
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 02888
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED: ("X" BOX FOR ATTACHMENT) ☐ 10. SHARES ISSUED: ("X" BOX FOR ATTACHMENT) ☐					
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES - THIS SECTION <u>MUST</u> BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			100 shares no par value		

11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

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.

Signature

Date

Richard H. Sceery, Jr.

Print or Type Name

President

Title

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040