



**State of Rhode Island
Office of the Secretary of State**

Fee: \$20.00

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: 2021

1. Corporate ID No. 000026826

2. Name of Corporation Elmhurst Youth Baseball

3. State of Incorporation

State: RI

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 [click here](#).

NAICS Code

4. Principal Office Address

No. and Street: PO BOX 28272
City or Town: PROVIDENCE State: RI Zip: 02908 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:
City or Town: State: Zip: Country:

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

LITTLE LEAGUE BASEBALL

6. Names and Addresses of the Officers and Directors:

All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JOSEPH M COUGHLIN	70 SANDRINGHAM AVENUE PROVIDENCE, RI 02908 USA
TREASURER	CARLEEN SIGNORE	62 CUMBERLAND STREET PROVIDENCE, RI 02908 USA
SECRETARY	BONNIE FARGNOLI	24 LESLIE DRIVE PROVIDENCE, RI 02908 USA
VICE PRESIDENT	JOHN FARGNOLI	24 LESLIE DRIVE PROVIDENCE, RI 02908 USA
DIRECTOR	TIMOTHY DONOVAN	193 HOME AVENUE PROVIDENCE, RI 02908 USA
DIRECTOR	NICHOLAS HEMOND	618 PLEASANT VALLEY PARKWAY PROVIDENCE, RI 02908 USA
DIRECTOR	JAMES SCOTT	13 CARPENTER STREET PROVIDENCE, RI 02908 USA
DIRECTOR	DIANN WILSON	45 SEAMANS STREET PROVIDENCE, RI 02908 USA
DIRECTOR	DARRYL SUPERCZYNSKI	16 COOPER STREET NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	LEONARD LOMBARDO	9 CLEAR MEADOW DRIVE NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	JAMES WILSON	35 LAWN STREET APT 2 PROVIDENCE, RI 02908 USA
DIRECTOR	GLORIA HART	37 GALILEO AVENUE PROVIDENCE, RI 02909 USA
DIRECTOR	BRENDA FIGUEROA ALVES	16 DURHAM STREET PROVIDENCE, RI 02908 USA
DIRECTOR	AARON JAEHNIG	79 RAVENSWOOD AVENUE PROVIDENCE, RI 02908 USA
DIRECTOR	SHEREE ALVES	59 LONGMONT AVENUE PROVIDENCE, RI 02908 USA

7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

LEONARD M. LOMBARDO 9 CLEAR MEADOW DRIVE NORTH PROVIDENCE , RI 02911

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

Signed this 2 Day of June, 2021 at 4:52:40 PM 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 JOSEPH M. COUGHLIN
Signature of Authorized Person

Revised 09/07

© 2007 - 2021 State of Rhode Island
All Rights Reserved