



**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. 001692313

2. Name of Corporation OCEAN STATE CHARITY EVENTS INC.

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: 47 COBBLESTONE TERRACE

City or Town: COVENTRY

State: RI Zip: 02816 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 47 COBBLESTONE TERRACE

City or Town: COVENTRY State: RI Zip: 02816 Country:

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

THE PURPOSE OF THE CORPORATION IS TO FURTHER THE MISSION OF DIVERSE NONPROFIT TAX-EXEMPT ORGANIZATIONS THROUGH CHARITABLE FUNDRAISING SERVICES, AND TO CARRY ON ANY OTHER LAWFUL ACTIVITY IN SUPPORT AND TO THE BENEFIT OF THE FOREGOING STATED PURPOSES AS MAY BE CARRIED ON BY AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE OF 1986, AS AMENDED, AND BY A CORPORATION FORMED UNDER THE RHODE ISLAND NONPROFIT CORPORATION ACT, R.I. GEN. LAWS 7-6 ET SEQ.

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	EDMUND EGAN	47 COBBLESTONE TERRACE COVENTRY, RI 02816 USA
PRESIDENT	EDMUND J EGAN	47 COBBLESTONE TERRACE COVENTRY, RI 02816 USA
TREASURER	EDMUND EGAN	47 COBBLESTONE TERRACE COVENTRY, RI 02816 USA
SECRETARY	ROSS HUDSON	24B MAIN STREET NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	ADAM RAMSEY	65 MONTEBELLO ROAD WARWICK, RI 02886 USA
DIRECTOR	EDMUND EGAN	47 COBBLESTONE TERRACE COVENTRY, RI 02816 USA
DIRECTOR	ROSS HUDSON	24B MAIN STREET NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	PAUL DONNELLY	16 JUNIPER ROAD #23 NORTH ATTLEBORO, MA 02760 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**

WILLIAM E. O'GARA, ESQ. 1301 ATWOOD AVENUE, SUITE 215N JOHNSTON , RI 02919

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

Signed this 16 Day of June, 2021 at 7:53:19 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 EDMUND J EGAN JR
Signature of Authorized Person

Form No. 631
Revised 09/07