



State of Rhode Island  
**Department of State - Business Services Division**

**Annual Report for the year: 2021**  
**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.

**FILED**

JUN 22 2021 *8*

BY 1540

1. Entity ID Number <b>796 753</b>		2. Exact name of the Corporation <b>Rhode Island Trapshooting Association</b>			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Promote trap and clay target shooting			
4. NAICS Code <b>812990</b>					
6. Principal Office Address 1551 Centreville Road		City Warwick		State RI	Zip 02886
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Michael Jaye</b>			Vice President Name <b>Dana Grealorex</b>		
Street Address <b>5 Saudra Drive</b>			Street Address <b>59 Oak Terrace</b>		
City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>Mapleville</b>	State <b>RI</b>	Zip <b>02839</b>
Secretary Name <b>Barbara Jaye</b>			Treasurer Name <b>Barbara Jaye</b>		
Street Address <b>5 Saundra Drive</b>			Street Address <b>5 Saundra Drive</b>		
City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>Westerly</b>	State <b>RI</b>	Zip <b>02839</b>
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Michael Jubin</b>			Director Name <b>Gregory Smith</b>		
Street Address <b>43 1/2 Laurel Avenue</b>			Street Address <b>2 Kirkbrac</b>		
City <b>Coventry</b>	State <b>RI</b>	Zip <b>02816</b>	City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865</b>
Director Name <b>Matthew Robinson</b>			Director Name <b>John M. Ruggieri</b>		
Street Address <b>34 Lakeside Street</b>			Street Address <b>1559 Putnam Pike</b>		
City <b>Riverside</b>	State <b>RI</b>	Zip <b>02915</b>	City <b>Chepachet</b>	State <b>RI</b>	Zip <b>02814</b>
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
<b>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.</b>					
<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 <b>Barbara Jaye</b>				Date	
Signature of Officer/Authorized Representative <i>Barbara A. Jaye</i>					

MAIL TO:  
 Division of Business Services  
 148 W River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov