



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****JUL 08 2021**BY 1772

1. Entity ID Number <b>28560</b>		2. Exact name of the Corporation <b>Chariho Athletic Association, Inc</b>			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island Provides and Maintains a recreational outdoor facility for the children in Chariho Communities (ie. Softball and Baseball Fields with a small playground)			
4. NAICS Code 813319 - Other Social Advocacy <input type="checkbox"/>					
6. Principal Office Address 1118 Main Street (PO Box 161)		City Hope Valley		State RI	Zip 02832
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>Anthony Apice</b>			Vice-President Name <b>Steven Hollister</b>		
Street Address <b>38 Canonchet Driftway</b>			Street Address <b>119 Fairview Avenue</b>		
City <b>Hope Valley</b>	State <b>RI</b>	Zip <b>02832</b>	City <b>Hope Valley</b>	State <b>RI</b>	Zip <b>02832</b>
Secretary Name <b>Valerie Parenti</b>			Treasurer Name <b>Beverly Kenney</b>		
Street Address <b>8 Sandy Pond Road</b>			Street Address <b>271 Spring Street</b>		
City <b>Hope Valley</b>	State <b>RI</b>	Zip <b>02832</b>	City <b>Rockville</b>	State <b>RI</b>	Zip <b>02873</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>Joshua Davis</b>			Director Name <b>Daniel Clarke</b>		
Street Address <b>47 High Street</b>			Street Address <b>45 Arcadia Road</b>		
City <b>Ashaway</b>	State <b>RI</b>	Zip <b>02804</b>	City <b>Hope Valley</b>	State <b>RI</b>	Zip <b>02832</b>
Director Name <b>Thomas Parenti</b>			Director Name		
Street Address <b>8 Sandy Pond Road</b>			Street Address		
City <b>Hope Valley</b>	State <b>RI</b>	Zip <b>02832</b>	City	State	Zip
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>					
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.					
Name of Officer/Authorized Representative <b>Beverly Kenney, Treasurer</b>				Date <b>6/28/2021</b>	
Signature of Officer/Authorized Representative 					