RI SOS Filing Number: 202103538020 Date: 10/20/2021 11:56:00 AM

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. 000027901

2. Name of Corporation Glocester Country Club

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

813990

4. Principal Office Address

No. and Street: P.O. BOX 547
ATTN: ACTING PRESIDENT
City or Town: GREENVILLE State: RI Zip: 02828 Country: USA

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

A NON PROFIT GOLF, TENNIS AND SWIM CLUB

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	ED DUFFY	182 AUSTIN AVENUE GLOCESTER, RI 02814 USA

TREASURER	JOSEPH FILOCCO	11 WHISPERING TERRACE DRIVE GREENVILLE, RI 02828 USA
SECRETARY	AMY WARNER	20 LAUREL WOODS AVENUE SMITHFIELD, RI 02917 USA
VICE PRESIDENT	CHERYL JASON	41 LAUREL DRIVE GLOCESTER, RI 02814 USA
DIRECTOR	ARMANDO BATASTINI	184 PUTNAM PIKE HARMONY, RI 02829 USA
DIRECTOR	CHERYL JASON	41 LAUREL DRIVE GLOCESTER, RI 02814 USA
DIRECTOR	JOHN J. JUDGE	46 BARNES STREET GREENVILLE, RI 02828 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

THOMAS E. HEFNER 2970 MENDON ROAD, UNIT 123 CUMBERLAND , RI 02864

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

Signed this 20 Day of October, 2021 at 11:58:49 AM 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 ARMANDO BATASTINI
Signature of Authorized Person

Form No. 631
Revised 09/07