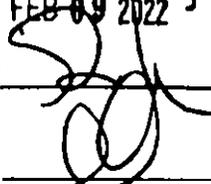




State of Rhode Island
Department of State - Business Services Division

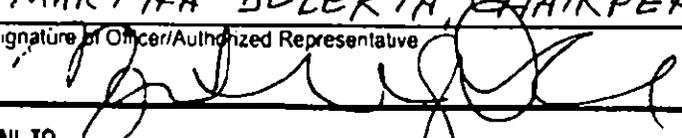
FILED

FEB 09 2022

BY 

Annual Report for the year: 2022
Non-Profit Corporation

- Filing period: February 1 - May 1
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 000100956		2. Exact name of the Corporation WARREN ATHLETIC HALL OF FAME COMMITTEE			
3. State of Incorporation RHODE ISLAND		5. Brief description of the character of business conducted in Rhode Island CREATION AND MAINTENANCE OF A HALL OF FAME FOR THOSE WHO HAVE DISTINGUISHED THEMSELVES IN ATHLETICS WHILE CONNECTED TO THE TOWN OF WARREN			
4. NAICS Code 712110					
6. Principal Office Address C/O JOHN W. FLYNN 21 BAGY WRINKLE COVE			City WARREN	State RI	Zip 02885
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
Resident Name CHAIRPERSON MARTHA DELEKTA			Vice-President Name N/A		
Street Address 65 SEYMOUR ST			Street Address _____		
City WARREN	State RI	Zip 02885	City _____	State _____	Zip _____
Secretary Name GARY MARTINS			Treasurer Name MARTHA DELEKTA		
Street Address 74 BACK ST			Street Address 65 SEYMOUR ST		
City SEEKONK	State MA	Zip 02771	City WARREN	State RI	Zip 02885
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors.					Check the box to indicate an attachment <input checked="" type="checkbox"/>
Director Name MARTHA DELEKTA			Director Name LESTER LOMBARDI		
Street Address 65 SEYMOUR ST			Street Address 48 CAMPBELL ST		
City WARREN	State RI	Zip 02885	City WARREN	State RI	Zip 02885
Director Name JOHN W. FLYNN			Director Name GARY MARTINS		
Street Address 21 BAGY WRINKLE COVE			Street Address 74 BACK ST		
City WARREN	State RI	Zip _____	City SEEKONK	State MA	Zip 02771
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641. NONE 6/11/22					
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.					
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Honorary or Trustee</small>					
Name of Officer/Authorized Representative MARTHA DELEKTA, CHAIRPERSON					Date 2/1/22
Signature of Officer/Authorized Representative 					

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

**WARREN ATHLETIC HALL OF FAME
ADDITIONAL DIRECTORS
2021 (Filed February, 2022)**

TU
100956

**Ted Abrain
57 Mason St.
Warren, RI 02885**

**Diane Gempp
32 Howard Street
Barrington, RI 02806**

**John Barry
22 Benefit Street
Warren, RI 02885**

**John Jannitto
37 Hope St.
Warren, RI 02885**

**Joe Catalano
10 Ruth Street
Johnston, RI 02919**

**James McMahon
868 Main St.
Warren, RI 02885**

**Charles Connolly
3 Cranberry Road
Warren, RI 02885**

**Matt Oliveira
15 Fern Drive
Warren, RI 02885**

**Jay Ferreira
12 Strawberry Lane
Warren, RI 02885**

**Al Sweet, Jr.
Nine Rollingwood Court
Warren, RI 02885**

**Charlie Francis
511 Child Street #607
Warren, RI 02885**

FILED
FEB 09 2022
BY 