



**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: February 1 - May 1

*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:** 2022

**1. Corporate ID No.** 001731774

**2. Name of Corporation** Sail to Win 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: 130 BELLEVUE AVENUE

City or Town: NEWPORT

State: RI

Zip: 02840

Country: USA

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

THE CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, EDUCATIONAL, AND SCIENTIFIC PURPOSES, AND WITHIN THE LIMITATIONS OF SUCH PURPOSES, EXCLUSIVELY TO HONOR AND EMPOWER WOUNDED VETERANS AND FIRST RESPONDERS WITH DISABILITIES BY TRAINING, EDUCATING, AND COMPETING IN SAILING COMPETITIONS AROUND THE GLOBE BY BRINGING ADAPTIVE AND ABLE-BODIED ATHLETES TOGETHER, CONDUCTING TRAINING EVENTS AND FACILITATING OPPORTUNITIES FOR TECHNOLOGY EXPERTS TO ASSIST SERVICE MEMBERS WITH SOLUTIONS THAT WILL HELP THEM BECOME HIGHLY COMPETITIVE IN SAILING, THEREBY

INCREASING THEIR EVERY DAY QUALITY OF LIFE. WE COMPETE TO WIN.

NO PART OF THE NET EARNINGS OF THE CORPORATION SHALL INURE TO THE BENEFIT OF ANY TRUSTEE, DIRECTOR OR OFFICER OF THE CORPORATION, OR ANY PRIVATE INDIVIDUAL (EXCEPT THAT REASONABLE COMPENSATION MAY BE PAID FOR SERVICES RENDERED TO OR FOR THE CORPORATION), AND NO TRUSTEE, DIRECTOR, OR OFFICER OF THE CORPORATION OR ANY PRIVATE INDIVIDUAL SHALL BE ENTITLED TO SHARE IN THE DISTRIBUTION OF ANY CORPORATE ASSETS ON DISSOLUTION OF THE CORPORATION.

NO SUBSTANTIAL PART OF THE ACTIVITIES OF THE CORPORATION SHALL BE CARRYING ON PROPAGANDA, OR OTHERWISE ATTEMPTING TO INFLUENCE LEGISLATION (EXCEPT AS OTHERWISE PROVIDED BY INTERNAL REVENUE CODE SECTION 501(H), OR PARTICIPATING IN, OR INTERVENING IN (INCLUDING THE PUBLICATION OR DISTRIBUTION OF STATEMENTS), ANY POLITICAL CAMPAIGN ON BEHALF OF ANY CANDIDATE FOR PUBLIC OFFICE).

**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.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
DIRECTOR	MICHAEL PATTERSON	3 CONCORD DRIVE MIDDLETOWN, RI 02842 USA
DIRECTOR	AARON PATRICK ISAACSON	75 HARBOUR HEIGHTS ANNAPOLIS, MD 21401 USA
DIRECTOR	WHITNEY STEVENS CURTIN	35 GREEN STREET NEWPORT, RI 02840 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**

RICHARD N. SAYER, ESQ. SAYER REGAN & THAYER, LLP 130 BELLEVUE AVENUE NEWPORT , RI 02840

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

*Signed this 28 Day of February, 2022 at 2:54:04 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 CYNTHIA WATERMAN  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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