



**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. 001731091

2. Name of Corporation Rhode Island Renegades

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: 10 LUCILLE DR
City or Town: SMITHFIELD State: RI Zip: 02828 Country: USA

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

TO DEVELOP, TRAIN, AND MENTOR RHODE ISLAND YOUTH IN THE SPORT OF
BASEBALL AND TO BUILD STRONG
COMMUNITY TIES BY PARTNERING WITH LOCAL BUSINESS AND COMMUNITY
MEMBERS TO SUPPORT THE
TEAM.

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	Address
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
INCORPORATOR	BRIAN MILLS	10 LUCILLE DRIVE GREENVILLE, RI 02828 USA
DIRECTOR	BRIAN MILLS	10 LUCILLE DRIVE GREENVILLE, RI 02828 USA
DIRECTOR	DEANA MILLS	10 LUCILLE DRIVE GREENVILLE, RI 02828 USA
DIRECTOR	JAMES LAPE	12 SPENCER ROAD 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**

BRIAN MILLS 10 LUCILLE DRIVE GREENVILLE , RI 02828

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

Signed this 21 Day of July, 2022 at 3:14:25 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 BRIAN MILLS
Signature of Authorized Person

Form No. 631
Revised 09/07

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