



**Department of State - Business Services Division**

**FILED**

FEB 15 2023

BY 2956  
RS

**Annual Report for the year: 2023**  
**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 <b>000031133</b>		2. Exact name of the Corporation <b>CRANSTON PORTUGUESE ROD &amp; GUN CLUB</b>			
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island <b>Social Sporting Rod &amp; Gun Club</b>			
4. NAICS Code <b>813990 - Other Similar Organiza</b>					
6. Principal Office Address <b>425 Gardner Road</b>		City <b>Exeter</b>	State <b>RI</b>	Zip <b>02822</b>	
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>Joao Arelo</b>		Vice-President Name <b>Celestino Correia</b>			
Street Address <b>36 Webb Avenue</b>		Street Address <b>23 Linda Street</b>			
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02888</b>	City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865</b>
Secretary Name <b>Antonio A Dias</b>		Treasurer Name <b>Jose A Cordeiro</b>			
Street Address <b>407 Doric Avenue</b>		Street Address <b>214 Pierce Avenue</b>			
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</b>	City <b>Warwick</b>	State <b>RI</b>	Zip <b>02888</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>Michael A Louro</b>		Director Name <b>Agostinho Furtado</b>			
Street Address <b>95 Briarcliff Road</b>		Street Address <b>117 Cleveland Street</b>			
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</b>	City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>01860</b>
Director Name <b>Olimpio A Menezes</b>		Director Name			
Street Address <b>225 Barton Street</b>		Street Address			
City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</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>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative <b>Antonio A Dias (Secretary)</b>				Date <b>2-13-2023</b>	
Signature of Officer/Authorized Representative 					