



State of Rhode Island

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 000031133		2. Exact name of the Corporation CRANSTON PORTUGUESE ROD & GUN CLUB			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Social Sporting Rod & Gun Club			
4. NAICS Code 813990 - Other Similar Organiza					
6. Principal Office Address 425 Gardner Road			City Exeter	State RI	Zip 02822
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
President Name Joao Arelo			Vice-President Name Celestino Correia		
Street Address 36 Webb Avenue			Street Address 23 Linda Street		
City Warwick	State RI	Zip 02888	City Lincoln	State RI	Zip 02865
Secretary Name Antonio A Dias			Treasurer Name Jose A Cordeiro		
Street Address 407 Doric Avenue			Street Address 214 Pierce Avenue		
City Cranston	State RI	Zip 02910	City Warwick	State RI	Zip 02888
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors.					Check the box to indicate an attachment <input type="checkbox"/>
Director Name Michael A Louro			Director Name Agostinho Furtado		
Street Address 95 Briarcliff Road			Street Address 117 Cleveland Street		
City Cranston	State RI	Zip 02910	City Pawtucket	State RI	Zip 01860
Director Name Olimpio A Menezes			Director Name		
Street Address 225 Barton Street			Street Address		
City Pawtucket	State RI	Zip 02860	City	State	Zip
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
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.					
<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 Antonio A Dias (Secretary)				Date 2-13-2023	
Signature of Officer/Authorized Representative 					

MAIL TO:
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