



**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: 2023

1. Corporate ID No. 000030736

2. Name of Corporation Young Pannese Social Club

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
813990

4. Principal Office Address

No. and Street: 187 POCASSET AVE
City or Town: PROVIDENCE State: RI Zip: 02909 Country: USA

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

PROMOTING GOOD BROTHERHOOD AND SPORTSMANSHIP IN UPHOLDING OUR DEMOCRATIC WAY OF LIFE

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
PRESIDENT	JASON PATRONE	990 ATWOOD AVENUE JOHNSTON, RI 02919 USA
SECRETARY	DAVID PAUL FULLER	10457 ADERMAN AVE SAN DIEGO, CA 92126 USA
DIRECTOR	EDWARD GENERALI	75 HARMON DR CRANSTON, RI 02910 USA
DIRECTOR	PETER GONECONTE	14 CARRIAGE WAY NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	CHRISTOPHER BISSANTI	148 WESTMINISTER SR PROVIDENCE, RI 02909 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**

GERALD COUILLARD 65 WINSOR AVE JOHNSTON , RI 02919

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

Signed this 6 Day of March, 2023 at 4:27:24 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 DAVID PAUL FULLER
Signature of Authorized Person

Form No. 631
Revised 09/07

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