



**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. 000121147

2. Name of Corporation NORTH PROVIDENCE BOYS & GIRLS CLUB ALUMNI ASSOCIATION

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

624110

4. Principal Office Address

No. and Street: 40 MURIEL AVENUE

City or Town: NORTH PROVIDENCE

State: RI

Zip: 02911

Country: USA

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

TO PROVIDE BOTH VOLUNTEER AND FINANCIAL SUPPORT

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
-------	-----------------	---------

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	FRED LACOMB	40 MURIEL AVENUE NORTH PROVIDENCE, RI 02911 USA
TREASURER	DAVID RICCI	17 FORESTWOOD DR SMITHFIELD, RI 02917 US
SECRETARY	KAREN LOMAX	1363 SMITH ST, APT 402 NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	JOSEPH SIMEONE	42 ROOSEVELT DR BRISTOL, RI 02809 USA
DIRECTOR	JAMES FITZGERALD	4 ASHBROOK RUN EAST GREENWICH, RI 02818 USA
DIRECTOR	CONNIE M MCCLURG	11 JOSEPHINE STREET NORTH PROVIDENCE, RI 02904 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

CONNIE M. MCCLURG 33 HOMEWOOD AVENUE NORTH PROVIDENCE , RI 02911

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

Signed this 12 Day of March, 2023 at 9:56:22 AM 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 CONNIE M. MCCLURG
Signature of Authorized Person

Form No. 631
Revised 09/07

© 2007 - 2023 State of Rhode Island
All Rights Reserved