	State of Rhode Office of the Secret		Fee: \$20.00	
	Division Of Busines 148 W. River S			
	Providence RI 029			
1636	(401) 222-30			
Non-Profit Corporation Annual Report Filing Period: February 1 - May	1			
In accordance with R.I.G.L. 7-6 annual report within the time pr penalty fee of \$25.00.	· · · · · · · · · · · · · · · · · · ·			
ANNUAL REPORT YEAR: 202	<u>3</u>			
1. Corporate ID No. <u>00003</u>	<u>30869</u>			
2. Name of Corporation CORVETTE CLUB OF RHODE ISLAND				
3. State of Incorporation				
State: <u>RI</u>				
	ARTICLE III			
Using the dropdown labeled N primary type of activity in whic populate a NAICS Code based box on the right. For further as	ch your entity engages. The d on the chosen selection. If	box to the right of the NAICS Code is	the dropdown will s known, enter it into the	
NAICS Code				
<u>813910</u>				
4. Principal Office Address				
No. and Street: 90 COI	WELLDD			
<u> </u>	<u>LWELL RD</u> ISVILLE State: <u>R</u>	<u>I</u> Zip: <u>02830</u>	Country: <u>USA</u>	
5. Brief Description of the Ch	aracter of the Affairs Cond	ucted in Rhode Isla	and	
TO ORGANIZE AND CARI	RY OUT CLUB FUNCTIC	NS.IE CAR SHO	WS, RALLYS,	
SOCIALS ETC.				
6. Names and Addresses of t	he 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.				
		ne number of DIRE	CTORS of a knode	

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	LILIANA V DOLAN	90 COLWELL RD HARRISSVILLE, RI 02830 USA
TREASURER	MICHAEL PASCALE	90 COLWELL ROAD HARRISSVILLE, RI 02830 USA
SECRETARY	DEBBIE PAPINEAU	90 COLWELL RD HARRISVILLE, RI 02830 USA
DIRECTOR	JAMES A CAMPANINI	90 COLWELL ROAD HARRISVILLE, RI 02830 USA
DIRECTOR	JAMES PETRARCA	90 COLWELL ROAD HARRISSVILLE, RI 02830 USA
DIRECTOR	RICHARD A. NELSON	90 COLWELL RD HARRISSVILLE, RI 02830 USA
VICE PRESIDENT	DENNIS V LANGLOIS	90 COLWELL ROAD HARRISSVILLE, RI 02830 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

LILIANA V. DOLAN 90 COLWELL RD HARRISVILLE , RI 02830

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

Signed this 27 Day of March, 2023 at 12:32:12 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 <u>LILIANA V DOLAN</u> Signature of Authorized Person

Form No. 631 Revised 09/07

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