



State of Rhode Island  
**Department of State - Business Services Division**

**FILED**

**APR 19 2023**

BY W009  
*RS*

**Annual Report for the year:** 2023  
**Non-Profit Corporation**

- Filing period: June 1 - June 30
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number 791930		2. Exact name of the Corporation Middletown High School Athletic Hall of Fame			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Our organization recognizes and honors the Athletic accomplishments of graduates, coaches and athletic supporters of Middletown High School			
4. NAICS Code 611110 - Elementary and Seco <input type="checkbox"/>					
6. Principal Office Address 130 Valley Road		City Middletown	State RI	Zip 02842	
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <u>Morrie W Seiple</u>			Vice-President Name <u>Lisa O'Brien</u>		
Street Address <u>27 White Terrace</u>			Street Address <u>10 Wabasso Terrace</u>		
City <u>Middletown</u>	State <u>RI</u>	Zip <u>02842</u>	City <u>Middletown</u>	State <u>RI</u>	Zip <u>02842</u>
Secretary Name <u>Jane Hale</u>			Treasurer Name <u>Morrie W Seiple</u>		
Street Address <u>616 Wolcott Ave</u>			Street Address <u>27 White Terrace</u>		
City <u>Middletown</u>	State <u>RI</u>	Zip <u>02842</u>	City <u>Middletown</u>	State <u>RI</u>	Zip <u>02842</u>
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 <u>Morrie W Seiple</u>			Director Name <u>Jane Hale</u>		
Street Address <u>27 White Terrace</u>			Street Address <u>616 Wolcott Ave</u>		
City <u>Middletown</u>	State <u>RI</u>	Zip <u>02842</u>	City <u>Middletown</u>	State <u>RI</u>	Zip <u>02842</u>
Director Name <u>Lisa O'Brien</u>			Director Name		
Street Address <u>10 Wabasso Terrace</u>			Street Address		
City <u>Middletown</u>	State <u>RI</u>	Zip <u>02842</u>	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 <u>Morrie W Seiple</u>				Date <u>April 15, 2023</u>	
Signature of Officer/Authorized Representative <i>Morrie W Seiple</i>					

MAIL TO:  
 Division of Business Services  
 148 W River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov