



State of Rhode Island  
Department of State - Business Services Division

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.

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BUS SVCS DIV

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1. Entity ID Number <u>26473</u>		2. Exact name of the Corporation <u>The Narragansett Pier Sportfishing Association</u>			
3. State of Incorporation <u>RI</u>		5. Brief description of the character of business conducted in Rhode Island <u>To promote sportfishing in the state of Rhode Island and to ensure protection of the state's natural resources.</u>			
4. NAICS Code <u>813319</u>					
6. Principal Office Address <u>40 Martin Wencek</u> <u>676 Middlebridge Rd.</u>			City <u>Wakefield</u>	State <u>RI</u>	Zip <u>02879</u>
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>Martin Wencek</u>			Vice-President Name <u>Ed Folgo</u>		
Street Address <u>676 Middlebridge Rd.</u>			Street Address <u>215 Scenic Drive</u>		
City <u>Wakefield</u>	State <u>RI</u>	Zip <u>02879</u>	City <u>North Kingstown</u>	State <u>RI</u>	Zip <u>02852</u>
Secretary Name <u>Peter Milton</u>			Treasurer Name <u>Jim Levy</u>		
Street Address <u>124 Marine Drive</u>			Street Address <u>71 Wildflower Trl.</u>		
City <u>Narragansett</u>	State <u>RI</u>	Zip <u>02882</u>	City <u>Wakefield</u>	State <u>RI</u>	Zip <u>02879</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>John Kennedy</u>			Director Name <u>Ken Booth</u>		
Street Address <u>82 Beach Plum Dr.</u>			Street Address <u>29 Franklin St.</u>		
City <u>Narragansett</u>	State <u>RI</u>	Zip <u>02882</u>	City <u>Lincoln</u>	State <u>RI</u>	Zip <u>02865</u>
Director Name <u>Roger Lima</u>			Director Name		
Street Address <u>48 Lakeside Drive</u>			Street Address		
City <u>Charlestown</u>	State <u>RI</u>	Zip <u>02816</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>MARTIN WENCEK</u>				Date <u>April 27, 2023</u>	
Signature of Officer/Authorized Representative <u>Martin Wencek</u>					

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MAIL TO:  
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