



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.

FILED

MAY 01 2023

1. Entity ID Number <b>000156301</b>		2. Exact name of the Corporation <b>Rhode Island USBC BA</b>	
3. State of Incorporation <b>Rhode Island</b>		5. Brief description of the character of business conducted in Rhode Island <b>Sanctioning/Governing Body for Ten Pin Bowling in Rhode Island to promote the sport/game of bowling in Rhode Island</b>	
4. NAICS Code <b>713950</b>			
6. Principal Office Address <b>44 Deacon Ave</b>		City <b>Warwick</b>	State <b>RI</b>
		Zip <b>02886</b>	
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <b>Jon Van Hees</b>		Vice-President Name <b>Chris Page</b>	
Street Address <b>25 Frances Barber Dr</b>		Street Address <b>32 Polk Ct</b>	
City <b>Hope Valley</b>	State <b>RI</b>	City <b>Newport</b>	State <b>RI</b>
Zip <b>02832</b>		Zip <b>02840</b>	
Secretary Name <b>Jason E Baker</b>		Treasurer Name <b>Jason E Baker</b>	
Street Address <b>44 Deacon Ave</b>		Street Address <b>44 Deacon Ave</b>	
City <b>Warwick</b>	State <b>RI</b>	City <b>Warwick</b>	State <b>RI</b>
Zip <b>02886</b>		Zip <b>02886</b>	
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 <b>Kristie Barszcz</b>		Director Name <b>George Williams</b>	
Street Address <b>166 Knollwood Cir</b>		Street Address <b>44 Topeka St</b>	
City <b>North Kingstown</b>	State <b>RI</b>	City <b>Cranston</b>	State <b>RI</b>
Zip <b>02852</b>		Zip <b>02920</b>	
Director Name <b>Michael Sedoma Jr.</b>		Director Name <b>Derrick Leveillee</b>	
Street Address <b>84 Anthony St Apt 2</b>		Street Address <b>52 Swan St</b>	
City <b>Fall River</b>	State <b>MA</b>	City <b>North Providence</b>	State <b>RI</b>
Zip <b>02721</b>		Zip <b>02911</b>	
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 <b>Jason E Baker, Association Manager (Secretary/Treasurer)</b>			Date <b>04/27/2023</b>
Signature of Officer/Authorized Representative <i>Jason E. Baker</i>			

MAIL TO:  
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Website: [www.sos.ri.gov](http://www.sos.ri.gov)