RI SOS Filing Number: 202335268410 Date: 5/4/2023 2:27:00 PM



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 - ENTER THE CURRENT FILING YEAR 2023: 2023

1. Corporate ID No. 000030207

- 2. Name of Corporation RHODE ISLAND GOLF 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 <u>click here.</u>

NAICS Code

813920

4. Principal Office Address

No. and Street: ONE BUTTON HOLE DRIVE

City or Town: PROVIDENCE State: RI Zip: 02909 Country: USA

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

THE PURPOSES OF THE CORPORATION SHALL BE (I) TO PROMOTE AND ADVANCE THE GAME OF GOLF IN THE STATE OF RHODE ISLAND THROUGH THE SPONSORSHIP OF AMATEUR GOLF TOURNAMENTS AND RELATED ACTIVITIES, AS WELL AS TO PROVIDE EDUCATIONAL OPPORTUNITIES RELATED TO THE SPORT TO ADULTS AND YOUTH; AND (II) TO CARRY ON ANY OTHER LAWFUL ACTIVITY IN SUPPORT OF AND TO BENEFIT THE ABOVE PURPOSES AS MAY BE CARRIED ON BY AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE OF 1986, AS AMENDED, AND BY A CORPORATION UNDER THE

RHODE ISLAND NONPROFIT CORPORATION ACT.

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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JACOB GAFFEY	ONE BUTTON HOLE DRIVE PROVIDENCE, RI 02909 USA
TREASURER	DENNIS TRIPODI	ONE BUTTON HOLE DRIVE PROVIDENCE, RI 02909 USA
VICE PRESIDENT	JAKE GAFFEY	ONE BUTTON HOLE DRIVE PROVIDENCE, RI 02909 USA
DIRECTOR	ROBERT WARD	1 BUTTON HOLE DRIVE PROVIDENCE, RI 02909 USA
DIRECTOR	STEVE SAMPSON	1 BUTTON HOLE DRIVE PROVIDENCE, RI 02909 USA
DIRECTOR	KEVIN CLARY	ONE BUTTON HOLE DRIVE PROVIDENCE, RI 02909 USA
DIRECTOR	KEVIN MCLOUGHLIN	ONE BUTTON HOLE DRIVE PROVIDENCE, RI 02909 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

ROBERT WARD, JR. ONE BUTTON HOLE DRIVE PROVIDENCE, RI 02909

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

Signed this 4 Day of May, 2023 at 2:30:04 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 ROBERT WARD

Signature of Authorized Person

Form No. 631 Revised 09/07