



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 15 2023
BY *[Signature]* STAMP

| | |
|--|---|
| 1. Entity ID Number 000029503 | 2. Exact name of the Corporation Warwick Sportsman's Association |
| 3. State of Incorporation Rhode Island | 5. Brief description of the character of business conducted in Rhode Island Promotion of Environmental Forestry |
| 4. NAICS Code 813990 | Fishing and Hunting |

| | | | |
|--|-----------------------|--------------------|---------------------|
| 6. Principal Office Address 316 A Hog House Hill Rd. | City Exeter | State RI | Zip 02822 |
|--|-----------------------|--------------------|---------------------|

7. List ALL officers (names and addresses) Check the box to indicate an attachment

| | | | | | |
|---------------------------------------|-----------------|------------------|--|-----------------|------------------|
| President Name John Defeo | | | Vice-President Name Michael Ruggeri | | |
| Street Address 87 Arcadia Rd. | | | Street Address 120 Midville Ave | | |
| City Exeter | State RI | Zip 02911 | City Cranston | State RI | Zip 02920 |
| Secretary Name Ron Nelson | | | Treasurer Name Ted Beahm | | |
| Street Address 41 Mohawk Trail | | | Street Address 450 Beach Ave. | | |
| City W. Greenwich | State RI | Zip 02817 | City Warwick | State RI | Zip 02889 |

8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment

| | | | | | |
|---------------------------------------|-----------------|------------------|---|-----------------|------------------|
| Director Name Richard Pateneau | | | Director Name Joe St.Lawrence | | |
| Street Address A-27 Kiezak Rd. | | | Street Address 316A Hog House Hill Rd. | | |
| City N.Kingstown | State RI | Zip 02822 | City Exeter | State RI | Zip 02822 |
| Director Name Greg Payette | | | Director Name | | |
| Street Address 47 Morgan Ave. | | | Street Address | | |
| City Johnston | State RI | Zip 02919 | City | State | Zip |

9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.

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.

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

| | |
|--|-------------------------|
| Name of Officer/Authorized Representative Theodore Beahm | Date 5/9/2023 |
|--|-------------------------|

Signature of Officer/Authorized Representative
[Signature]

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