



**State of Rhode Island  
Office of the Secretary of State**

No Fee

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Domestic Non-Profit  
Annual Report - Amended**

Filing Period: February 1 - May 1

*In accordance with R.I.G.L. 7-1.2-1501(e), 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.*

**This form is only to be used to amend the current annual report on file with this office.**

**ANNUAL REPORT YEAR:** 2023

**1. Corporate ID No.** 000028157

**2. Name of Corporation** MADCAP INC.

**NAICS CODE**

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 [click here](#).

NAICS Code  
813319

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 33 RHODES STREET

City or Town: CUMBERLAND

State: RI

Zip: 02864

Country: USA

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

TO FURTHER THE AERONAUTICAL KNOWLEDGE AND PROFICIENCY OF THE PILOTS OF THE CORPORATION

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**

**THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3).  
R.I.G.L.  
7-6-23**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	LEONARD DUNN	33 RHODES ST CUMBERLAND, RI 02864 USA
TREASURER	GARY LAVOIE	50 SEMINOLE TRAIL CRANSTON, RI 02921 USA
VICE PRESIDENT	ROSS MCCURDY	10 MEADOW VIEW DRIVE SMITHFIELD, RI 02917 USA
DIRECTOR	KEITH SALISBURY	2344 PLAINFIELD PIKE JOHNSTON, RI 02919 USA
DIRECTOR	LEONARD DUNN	33 RHODES STREET CUMBERLAND, RI 02864 USA
DIRECTOR	GARY LAVOIE	50 SEMINOLE TRAIL CRANSTON, RI 02921 USA
DIRECTOR	ROSS MCCURDY	10 MEADOW VIEW DRIVE SMITHFIELD, RI 02917 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER**  
**Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

LEONARD DUNN 33 RHODES STREET CUMBERLAND , RI 02864

**Signed this 31 Day of July, 2023 at 9:06:19 AM 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 GARY LAVOIE  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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State of Rhode Island

**Department of State | Office of the Secretary of State**

**Gregg M. Amore**, *Secretary of State*

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,  
hereby certify that this document, duly executed in accordance with the provisions  
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this

office on this day:

July 31, 2023 09:05 AM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is fluid and cursive, with the first letters of each word being capitalized.

Gregg M. Amore  
*Secretary of State*

