



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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|                                                                                                                                                                                                                    |                    |                                                                                                                                                                                                                            |                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| 1. Entity ID Number<br><u>000878056</u>                                                                                                                                                                            |                    | 2. Exact name of the Corporation<br><u>WHS Sports Boosters</u>                                                                                                                                                             |                        |
| 3. State of Incorporation<br><u>RI</u>                                                                                                                                                                             |                    | 5. Brief description of the character of business conducted in Rhode Island<br><u>RAISE MONEY THROUGH CONCESSION AND FUNDRAISERS TO PAY FOR THE END OF THE YEAR BANQUET AND RELATED ACTIVITIES TO SUPPORT OUR ATHLETES</u> |                        |
| 4. NAICS Code<br><u>713990</u>                                                                                                                                                                                     |                    |                                                                                                                                                                                                                            |                        |
| 6. Principal Office Address<br><u>PO BOX 2982 (WESTERLY HIGH SCHOOL WORD AVE WESTERLY RI)</u>                                                                                                                      |                    | City<br><u>WESTERLY</u>                                                                                                                                                                                                    | State<br><u>RI</u>     |
|                                                                                                                                                                                                                    |                    | Zip<br><u>02891</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<br><u>TRUDEE CARRIERO</u>                                                                                                                                                                           |                    | Vice-President Name<br><u>JULIE SACKO</u>                                                                                                                                                                                  |                        |
| Street Address<br><u>GARDNER DR</u>                                                                                                                                                                                |                    | Street Address<br><u>N CAPALBO DR</u>                                                                                                                                                                                      |                        |
| City<br><u>WESTERLY</u>                                                                                                                                                                                            | State<br><u>RI</u> | City<br><u>BRADFORD</u>                                                                                                                                                                                                    | State<br><u>RI</u>     |
| Zip<br><u>02891</u>                                                                                                                                                                                                |                    | Zip<br><u>02891</u>                                                                                                                                                                                                        |                        |
| Secretary Name<br><u>DANA HORTON</u>                                                                                                                                                                               |                    | Treasurer Name<br><u>Catherine Stahl</u>                                                                                                                                                                                   |                        |
| Street Address<br><u>4 BERRY DR</u>                                                                                                                                                                                |                    | Street Address<br><u>11 EMERALD ST</u>                                                                                                                                                                                     |                        |
| City<br><u>WESTERLY</u>                                                                                                                                                                                            | State<br><u>RI</u> | City<br><u>WESTERLY</u>                                                                                                                                                                                                    | State<br><u>RI</u>     |
| Zip<br><u>02891</u>                                                                                                                                                                                                |                    | Zip<br><u>02891</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<br><u>TRUDEE CARRIERO</u>                                                                                                                                                                            |                    | Director Name<br><u>JULIE SACKO</u>                                                                                                                                                                                        |                        |
| Street Address<br><u>GARDNER DR</u>                                                                                                                                                                                |                    | Street Address<br><u>N CAPALBO DR</u>                                                                                                                                                                                      |                        |
| City<br><u>WESTERLY</u>                                                                                                                                                                                            | State<br><u>RI</u> | City<br><u>WESTERLY</u>                                                                                                                                                                                                    | State<br><u>RI</u>     |
| Zip<br><u>02891</u>                                                                                                                                                                                                |                    | Zip<br><u>02891</u>                                                                                                                                                                                                        |                        |
| Director Name<br><u>DANA HORTON</u>                                                                                                                                                                                |                    | Director Name<br><u>CATHERINE STAHL</u>                                                                                                                                                                                    |                        |
| Street Address<br><u>4 BERRY DR</u>                                                                                                                                                                                |                    | Street Address<br><u>11 EMERALD ST</u>                                                                                                                                                                                     |                        |
| City<br><u>WESTERLY</u>                                                                                                                                                                                            | State<br><u>RI</u> | City<br><u>WESTERLY</u>                                                                                                                                                                                                    | State<br><u>RI</u>     |
| Zip<br><u>02891</u>                                                                                                                                                                                                |                    | Zip<br><u>02891</u>                                                                                                                                                                                                        |                        |
| 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>        |                    |                                                                                                                                                                                                                            |                        |
| 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<br><u>Catherine Stahl</u>                                                                                                                                                |                    |                                                                                                                                                                                                                            | Date<br><u>9-21-23</u> |
| Signature of Officer/Authorized Representative<br><u>Catherine Stahl</u>                                                                                                                                           |                    |                                                                                                                                                                                                                            |                        |

MAIL TO:  
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FILED

SEP 26 2023  
BY ILLIK

A.A. 1:16pm.