

**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 YEAR 2024: 2024**1. Corporate ID No.** 000030940**2. Name of Corporation** COVENTRY GIRLS SOFTBALL, INC.**3. State of Incorporation**State: RI**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

713990**4. Principal Office Address**No. and Street: 101 RESERVOIR ROADCity or Town: COVENTRYState: RIZip: 02816Country: USA**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**THE OPERATION OF A GIRLS SOFTBALL LEAGUE AGES 5-18**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	AMY SUFFOLETTO	101 RESERVOIR ROAD COVENTRY, RI 02816 USA
TREASURER	JAMES TARRO	39 SHARON DRIVE COVENTRY, RI 02816 USA
SECRETARY	KRISTY WEINCES	50 PEMBROKE LANE COVENTRY , RI 02816 US
TOURNAMENT	THOMAS NISBET	19 MANNING CT COVENTRY , RI 02816 US
TRUSTEE	GERI OMALLEY	4 BELMAR RD COVENTRY , RI 02816 US
DIRECTOR IT	MICHAEL RUSSO	17 HORNBEAM COVENTRY , RI 02816 US
DIRECTOR	KERIANNE TARRO	39 SHARON DRIVE COVENTRY, RI 02816 USA
DIRECTOR	ASHLEY REYES	25 TIFFANY ROAD COVENTRY, RI 02816 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

GINA M. CABRAL 2865 HARKNEY HILL ROAD COVENTRY , RI 02816

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

Signed this 29 Day of September, 2023 at 11:53:02 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 KERIANNE TARRO
Signature of Authorized Person

Form No. 631
Revised 09/07

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