

**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.** 000026664**2. Name of Corporation** Old Timers R/C Flyers, 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

813990**4. Principal Office Address**No. and Street: 43 PAMELA DRCity or Town: SWANSEAState: MAZip: 02777Country: USA**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**TO BUILD AND FLY MODEL AIRCRAFT AND MAINTAIN A SAFE FLYING SITE**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	JOHN ORABONE	95 BEAR HILL RD CUMBERLAND, RI 02864 USA
TREASURER	PAUL MATTHEW TRAVERS	43 PAMELA DRIVE SWANSEA, MA 02777 USA
SECRETARY	MICHAEL STOOS	200 NARROW LANE EXETER, RI 02822 USA
VICE PRESIDENT	PETER ACCARDI	16 TOBIN LANE BRISTOL, RI 02809 USA
DIRECTOR	JOHN ORABONE	95 BEAR HILL RD CUMBERLAND, RI 02864 USA
DIRECTOR	MICHAEL STOOS	200 NARROW LANE EXETER, RI 02822 USA
DIRECTOR	PAUL M TRAVERS	43 PAMELA DR SWANSEA, MA 02777 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

JOHN ORABONE 95 BEAR HILL ROAD CUMBERLAND , RI 02864

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

Signed this 9 Day of January, 2024 at 10:13:43 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 PAUL M TRAVERS
Signature of Authorized Person

Form No. 631
Revised 09/07

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