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. 001256282

2. Name of Corporation CONNECTICUT RHODE ISLAND CONTEST GROUP, 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: C/O MICHAEL VISICH
31 WHITE FALLS TRAIL
City or Town: WAKEFIELD State: RI Zip: 02879 Country: USA

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

TO PROMOTE RADIO KNOWLEDGE AND INDIVIDUAL OPERATING EFFICIENCY

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	Address

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	JOHN M SPIGEL	226 LAMBTOWN ROAD LEDYARD, CT 06339 USA
TREASURER	MICHAEL VISICH	31 WHITE FALLS TRL WAKEFIELD, RI 02879 USA
DIRECTOR	JOHN F LINDHOLM	48 SHANNOCK ROAD SOUTH KINGSTON, RI 02879 USA
DIRECTOR	JAMES P BOWMAN	50 WALNUT ROAD BARRINGTON, RI 02806 USA
DIRECTOR	RICHARD P BEEBE	6 TRACY CIRCLE BILLERICA, MA 01821 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

MICHAEL VISICH 31 WHITE FALLS TRAIL WAKEFIELD , RI 02879

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

Signed this 8 Day of February, 2024 at 10:30:40 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 MICHAEL VISICH
Signature of Authorized Person

Form No. 631
Revised 09/07