



Department of State - Business Services Division

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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.

1. Entity ID Number 001717428	2. Exact name of the Corporation Rhode Island Cowboy Cruisers, Inc.
3. State of Incorporation R.I.	5. Brief description of the character of business conducted in Rhode Island To hold car shows to raise food contributions and maintain a food bank.
4. NAICS Code 624190	

6. Principal Office Address 335 Cooper Road		City Chepachet	State R.I.	Zip 02814
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7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Alfred Korsak			Vice-President Name Cindy Stockwell		
Street Address 335 Cooper Road			Street Address 335 Cooper Road		
City Chepachet	State R.I.	Zip 02814	City Chepachet	State R.I.	Zip 02814
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Alfred Korsak			Director Name Bernard P. Healy		
Street Address 335 Cooper Road			Street Address 750 East Avenue		
City Chepachet	State R.I.	Zip 02814	City Pawtucket	State R.I.	Zip 02860
Director Name Cindy Stockwell			Director Name		
Street Address 335 Cooper Road			Street Address		
City Chepachet	State R.I.	Zip 02814	City	State	Zip

9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.

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.

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 **Bernard P. Healy** Date **Feb 22 2024**

Signature of Officer/Authorized Representative *Bernard P. Healy* **FILED 1123**

FEB 26 2024
BY EK2HW

MAIL TO:
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