|  | State of RI<br>Office of the Se                       | node Island<br>ecretary of Sta       | ate                          | Fee: \$20.00        |
|--|---|--------------------------------------|------------------------------|---------------------|
|  | Division Of Bu  | siness Services                      | 5                            |                     |
|  |   | iver Street                          |                              |                     |
| 1636   |   | LI 02904-2615                        |                              |                     |
| .030   | (401) 2   | 22-3040                              |                              |                     |
| Non-Profit Corporation<br>Annual Report<br>Filing Period: February 1 - N   | lay 1   |                                      |                              |                     |
| In accordance with R.I.G.L.<br>annual report within the time<br>penalty fee of \$25.00.                                  |   |                                      |                              |                     |
| ANNUAL REPORT YEAR - I   | INTER THE CURRENT YE                                  | AR <b>2024</b> : <u>202</u>          | 24                           |                     |
| 1. Corporate ID No. <u>00</u>  | 1726191   |                                      |                              |                     |
| 2. Name of Corporation $\underline{E}$   | lgewood Girls Basketbal                               | League                               |                              |                     |
| 3. State of Incorporation  |   |                                      |                              |                     |
| State: <u>RI</u>   |   |                                      |                              |                     |
|  | NAICS C   | ODE                                  |                              |                     |
| Using the dropdown labeled<br>primary type of activity in w<br>populate a NAICS Code ba<br>box on the right. For further | hich your entity engages<br>sed on the chosen selecti | . The box to the<br>on. If the NAICS | right of the<br>S Code is kn | dropdown will       |
| NAICS Code   |   |                                      |                              |                     |
| <u>813990</u>  |   |                                      |                              |                     |
| 4. Principal Office Addres   | 5   |                                      |                              |                     |
| No. and Street: 1997 ]   | BROAD STREET  |                                      |                              |                     |
|  | ISTON   | State: <u>RI</u> Z                   | ip: <u>02905</u>             | Country: <u>USA</u> |
| 5. Brief Description of the  | Character of the Affairs                              | Conducted in R                       | hode Island                  |                     |
| TO PROMOTE AND OR<br>EDGEWOOD SECTION<br>TO DEVELOP THEIR BA<br>PURPOSE.   | OF CRANSTON, TO A                                     | LLOW GIRLS                           | AGES 5 TO                    | D 17 YEARS OLD      |
| 6. Names and Addresses o   | of the Officers and Direc                             | tors:                                |                              |                     |
| All Directors and Officers<br>Island Corporation shall n   |   | lly. The number                      | of DIRECT                    | ORS of a Rhode      |

| Title    | Individual Name<br>First, Middle, Last, Suffix | Address<br>Address, City or Town, State, Zip Code, Country |
|----------|--|--|
| DIRECTOR | MELANIE MILLER                                 | 1997 BROAD STREET<br>CRANSTON, RI 02905 USA                |
| DIRECTOR | ROBERT WILSON                                  | 114 MAYFLOWER DRIVE<br>CRANSTON, RI 02905 USA              |
| DIRECTOR | SUZANNE O'DONOGHUE                             | 7 FRUIT STREET<br>CRANSTON, RI 02920 USA                   |
| DIRECTOR | SHYRAH RAMIREZ                                 | 32 SARAH LANE<br>WARWICK, RI 02889 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

WILLIAM PYNE 85 SEFTON DRIVE CRANSTON , RI 02905

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

**Signed this 10 Day of March, 2024 at 2:20:44 PM 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 MELANIE MILLER

Signature of Authorized Person

Form No. 631 Revised 09/07

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