



**State of Rhode Island
Department of State - Business Services Division**

APR 08 2024

17128

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Annual Report for the year: 2024
Corporation

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entry ID Number 17384		2. Exact name of the Corporation RALLY POINT RACQUET CLUB, INC.			
3. Principal Office Address 15 Church Street			City Greenville	State RI	Zip 02828
4. NAICS Code 713940		6. Brief description of the character of business conducted in Rhode Island operate indoor tennis club			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Timothy F. Kane			Vice-President Name Steven Cavanagh		
Street Address 627 Putnam Pike			Street Address 638 Shermantown Road		
City Greenville	State RI	Zip 02828	City Saunderstown	State RI	Zip 02874
Secretary Name Anna Marie DeConti			Treasurer Name Diane M. Kane		
Street Address 503 Great Road			Street Address 55 White Pine Drive		
City Lincoln	State RI	Zip 02865	City Scituate	State RI	Zip 02857
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Diane M. Kane			Director Name Brian Cavanagh		
Street Address 55 White Pine Drive			Street Address 620 Putnam Pike		
City Scituate	State RI	Zip 02857	City Greenville	State RI	Zip 02828
Director Name Anna Marie CeConti			Director Name Timothy F. Kane		
Street Address 503 Great Road			Street Address 627 Putnam Pike		
City Lincoln	State RI	Zip 02865	City Greenville	State RI	Zip 02828
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		3000		common	\$1.00
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee. 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.					
Name of Authorized Representative Timothy F. Kane				Date 4/4/24	
Signature of Authorized Representative 					

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

ANNUAL REPORT for the year 2024

**RALLY POINT RACQUET CLUB, INC.
ID#17384**

8. List of Directors (names and addresses): - Continued

**Director Name: Joseph DeAngelis
Address: 1 Citizens Plaza
Providence, RI 02903**