State of Rhode Island
Office of the Secretary of State

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Fee: $20.00

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. 001677504

2. Name of Corporation South Kingstown Youth Wrestling Club

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
541690

4. Principal Office Address

No. and Street: PO BOX 406
City or Town: WEST KINGSTON State: RI Zip: 02892 Country: USA

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

TO ORGANIZE YOUTH WRESTLING PRACTICES AND EVENTS.

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

DIRECTOR	TREVOR RICHMOND	641 GLEN ROCK ROAD WEST KINGSTON, RI 02892 USA
DIRECTOR	MICHAEL J MILLEN SR.	65 TUPELO TRAIL NARRAGANSETT, RI 02882 USA
DIRECTOR	JOSH JAMES	PO BOX 406 WEST KINGSTON, RI 02892 USA
DIRECTOR	LEE DUCKWORTH	40 WILD ROSE CT. WAKEFIELD, RI 02879 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

JOSH JAMES 155 LARKIN POND RD. NORTH WEST KINGSTON , RI 02892

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

Signed this 11 Day of April, 2024 at 8:39:53 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 TREVOR RICHMOND
Signature of Authorized Person

Form No. 631
Revised 09/07