



**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. 000088103

2. Name of Corporation The Rhode Island Golf Course Superintendents' Association

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

813910

4. Principal Office Address

No. and Street: 36 ELISHA MATHEWSON ROAD

City or Town: NORTH SCITUATE

State: RI Zip: 02857 Country: USA

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

TO PROVIDE FOR AND ENHANCE THE RECOGNITION OF GOLF COURSE
SUPERINTENDENTS.

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
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	MATTHEW EMOND	5 HEATH ROAD WEST WAREHAM, MA 02576 USA
TREASURER	PATRICK MEEHAN	31 HOLLY POND ROAD MARION, MA 02738 USA
SECRETARY	MICHELLE MALTAIS	PO BOX 63 TIVERTON, RI 02878 USA
PAST PRESIDENT	JOHN LOMBARDI	105 LOMBARDI LANE WEST WARWICK, RI 02893 USA
VICE PRESIDENT	MICHELLE MATAIS	PO BOX 63 TIVERTON, RI 02878 USA
DIRECTOR	THOMAS HOFFER	15 PRIMROSE DRIVE RIVERSIDE, RI 02915 USA
DIRECTOR	DANIEL MCDERMOTT	16 PALMER STREET NEWPORT, RI 02840 USA
DIRECTOR	SHAUN MARCELLUS	152 BROWNS LANE MIDDLETOWN, RI 02842 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

JULIE HESTON 36 ELISHA MATHEWSON ROAD NORTH SCITUATE , RI 02857

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

Signed this 12 Day of April, 2024 at 12:41:04 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 MATTHEW EMOND
Signature of Authorized Person

Form No. 631
Revised 09/07

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