



**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. 000160252

2. Name of Corporation NORTHERN RHODE ISLAND SPORTSMEN'S 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

813312

4. Principal Office Address

No. and Street: 671 TWIN BROOK LANE

City or Town: COVENTRY

State: RI

Zip: 02816

Country: USA

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

TO PROMOTE, ENGAGE IN, AND IMPROVE THE STATUS OF ALL OUTDOOR SPORTS AND RECREATIONAL ACTIVITIES THROUGHOUT THE UNITED STATES OF AMERICA

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
TREASURER	KENNETH PAUL DELISI	185 COBURN ST WARWICK, RI 02889 USA
SECRETARY	MATTHEW RICHARDSON	22 MONROE CT COVENTRY, RI 02816 USA
DIRECTOR	PAUL DOLDUC	915 WALLUM LAKE ROAD PASCOAG, RI 02859- USA
PRESIDENT	WILLIAM POTTER	9 ROLAND WEST GREENWICH, RI 02817 USA
VICE PRESIDENT	TIM CHAMPAGNE	82 MAIN STREET SLATERSVILLE, RI 02876 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

MARK MCLEAN 671 TWIN BROOK LANE COVENTRY , RI 02816

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

Signed this 15 Day of April, 2024 at 10:44:39 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 KENNETH DELISI
Signature of Authorized Person

Form No. 631
Revised 09/07

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