



**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. 001683970

2. Name of Corporation SHS Baseball Booster 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

813219

4. Principal Office Address

No. and Street: 13 DILLION LANE

City or Town: SMITHFIELD

State: RI

Zip: 02917

Country: USA

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

TO RAISE MONEY FOR THE SMITHFIELD HIGH SCHOOL BASEBALL TEAM

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
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PRESIDENT	AMY ANTUNES	13 DILLON LANE SMITHFIELD, RI 02917 USA
TREASURER	JUSTINE SANDS	90 RIDGE ROAD SMITHFIELD, RI 02917 USA
SECRETARY	DAWN SIMONELLI	73 BROOKSIDE AVE NORTH PROVIDENCE, RI 02911 USA
VICE PRESIDENT	JENIFER DWYER	7 KRISTEN DR SMITHFIELD, RI 02828 USA
DIRECTOR	JENIFER DWYER	7 KRISTEN DR. SMITHFIELD, RI 02828 USA
DIRECTOR	JUSTINE SANDS	90 RIDGE ROAD SMITHFIELD, RI 02917 USA
DIRECTOR	AMY ANTUNES	13 DILLON LANE SMITHFIELD, RI 02917 USA
DIRECTOR	DAWN SIMONELLI	73 BROOKSIDE AVE NORTH PROVIDENCE, RI 02911 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

AMY ANTUNES 13 DILLON LANE SMITHFIELD , RI 02917

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

Signed this 23 Day of April, 2024 at 3:10:11 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 JUSTINE SANDS
Signature of Authorized Person

Form No. 631
Revised 09/07

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