



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. 000122218

2. Name of Corporation BLACKSTONE VALLEY TENNIS 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

122218

4. Principal Office Address

No. and Street: PO BOX 7302

City or Town: CUMBERLAND

State: RI

Zip: 02864

Country: USA

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

TO PROMOTE AND DEVELOP THE GAME OF TENNIS IN THE BLACKSTONE VALLEY AREA

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
-------	-----------------	---------

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	DAVID M. MORIN	P.O.BOX 7302 CUMBERLAND, RI 02864 USA
TREASURER	DAVID MARC MORIN	PO BOX 7302 CUMBERLAND, RI 02864 USA
SECRETARY	LINDA MICHELLE MORIN	7 FLEUETTE DRIVE BELLINGHAM, MA 02019 USA
DIRECTOR	DAVID MORIN	33 CRAY STREET CUMBERLAND, RI 02864 USA
DIRECTOR	DAVID BARSTOW EATON	3240 MENDON RD. CUMBERLAND, RI 02864 USA
DIRECTOR	BRIAN MAURICE MORIN	76 RIDGE RD. SMITHFIELD, RI 02917 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

DAVID M. MORIN 44 CRAY STREET CUMBERLAND , RI 02864

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 3:52:17 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 DAVID M MORIN
Signature of Authorized Person

Form No. 631
Revised 09/07

© 2007 - 2024 State of Rhode Island
All Rights Reserved