



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2024

Non-Profit Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

JUL 01 2024

109512025

1. Entity ID Number 000123737		2. Exact name of the Corporation Rock-N-Jock Charities	
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Nonprofit which raises money to assist children and their families with life-threatening illnesses and live in RI.	
4. NAICS Code 813219			
6. Principal Office Address 47 John Mowry Road		City Smithfield	State RI
		Zip 02917	
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Stephen E. Smith		Vice-President Name Bill Geary	
Street Address 47 John Mowry Road		Street Address 66 Pond View Drive	
City Smithfield	State RI	City Warwick	State RI
Zip 02917		Zip 02886	
Secretary Name Suzanne Viner		Treasurer Name Dana Sherman	
Street Address 1 Pond View Drive		Street Address 194 Council Rock Road	
City Warwick	State RI	City Cranston	State RI
Zip 02886		Zip 02921	
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>			
Director Name Stephen E. Smith		Director Name Steve Viner	
Street Address 47 John Mowry Road		Street Address 1 Pond View Drive	
City Smithfield	State RI	City Warwick	State RI
Zip 02917		Zip 02886	
Director Name Jack E. Dilorio		Director Name	
Street Address 5 Woodward Road		Street Address	
City Johnston	State RI	City	State
Zip 02919		Zip	
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.			
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.			
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>			
Name of Officer/Authorized Representative Stephen E. Smith			Date 6/22/2024
Signature of Officer/Authorized Representative 			

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov