



**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.** 001681497

**2. Name of Corporation** South Kingstown Girls' Slow Pitch Softball League

**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  
624110

**4. Principal Office Address**

No. and Street: PO BOX 5174

City or Town: WAKEFIELD State: RI Zip: 02879 Country: USA

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

A. THE LEAGUE IS ORGANIZED EXCLUSIVELY TO SERVE THE PURPOSE OF A QUALIFIED AMATEUR SPORTS ORGANIZATION WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE. IT IS ORGANIZED AND OPERATED EXCLUSIVELY TO FOSTER NATIONAL AMATEUR SPORTS COMPETITION AND PRIMARILY TO CONDUCT NATIONAL COMPETITION IN SPORTS AND TO SUPPORT AND DEVELOP AMATEUR ATHLETES FOR THAT COMPETITION. TO ACHIEVE ITS PURPOSE, THE LEAGUE WILL PROVIDE SUPERVISED, COMPETITIVE SOFTBALL FOR

GIRLS AND HELP THEM ESTABLISH THE RUDIMENTS OF TEAMWORK AND FAIR PLAY. B. THE LEAGUE PHILOSOPHY IS THAT MOLDING FUTURE ADULTS IS OF PRIMARY IMPORTANCE AND THAT THE ATTAINMENT OF EXCEPTIONAL ATHLETIC SKILLS AND WINNING GAMES IS SECONDARY.

**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.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	RACHEL HIENER	PO BOX 5174 WAKEFIELD, RI 02879 USA
TREASURER	PATRICIA ROOSA	PO BOX 5174 WAKEFIELD, RI 02879 USA
SECRETARY	JANINE MASON	PO BOX 5174 WAKEFIELD, RI 02879 USA
VICE PRESIDENT	TORREY MARTIN	PO BOX 5174 WAKEFIELD, RI 02879 USA
DIRECTOR	JESSICA PARKER	PO BOX 5174 WAKEFIELD, RI 02879 USA
DIRECTOR	ALEXANDRA MAGGS	PO BOX 5174 WAKEFIELD, RI 02879 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**

RACHEL HIENER 50 GEORGE SCHAEFFER ST WAKEFIELD , RI 02879

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

**Signed this 11 Day of July, 2024 at 9:08:57 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 RACHEL HIENER  
Signature of Authorized Person

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