



**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 2025:** 2025

**1. Corporate ID No.** 000162646

**2. Name of Corporation** Friends of Middle School Soccer, Inc.

**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  
611110

**4. Principal Office Address**

No. and Street: 241 WALDRON AVE  
City or Town: NORTH KINGSTOWN State: RI Zip: 02852 Country: USA

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

TO ESTABLISH AND OPERATE A SOCCER PROGRAM AT THE MIDDLE SCHOOL LEVEL IN THE TOWN OF NORTH KINGSTOWN

**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
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	BYRON LIND	241 WALDRON AVE NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	BECKY FREITAS	241 WALDRON AVE. NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	ERIN WATSON	241 WALDEN AVE NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	CHI CHIN	241 WALDRON AVE. NORTH KINGSTOWN, RI 02582 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**

BYRON LIND 241 WALDRON AVENUE NORTH KINGSTOWN , RI 02852

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

**Signed this 27 Day of January, 2025 at 11:16:27 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 BYRON W LIND  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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