



**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. 001663359

2. Name of Corporation Full Swing Golf RI

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

813990

4. Principal Office Address

No. and Street: 121 OAKDALE ROAD

City or Town: NORTH KINGSTOWN

State: RI

Zip: 02852

Country: USA

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

THE PURPOSE OF FULL SWING GOLF RI IS TO PARTNER CHILDREN WITH PHYSICAL NEEDS WITH GOLF PROFESSIONALS AND PHYSICAL THERAPISTS TO TEACH THEM THE GAME OF GOLF. CHILDREN LEARN THE MECHANICS RELATED TO THEIR CHALLENGES AND THE CORRECT APPROACH FOR THEM. THE PURPOSE IS TO OVERCOME SOCIAL STIGMAS, BUILD CONFIDENCE, AND PROVIDE A THERAPEUTIC AND RECREATIONAL OUTLET FOR CHILDREN WITH DISABILITIES.

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
DIRECTOR	PAULA F. KLENIEWSKI	121 OAKDALE ROAD NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	PAUL F. KLENIEWSKI	27 STANTON AVE NARRAGANSETT, RI 02882 USA
DIRECTOR	ELISA A. POULIOT	5 WILOGREEN ROAD NATICK, MA 01760 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

PAULA F. KLENIEWSKI 121 OAKDALE ROAD 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 18 Day of February, 2025 at 4:46:10 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 PAULA KLENIEWSKI
Signature of Authorized Person

Form No. 631
Revised 09/07

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