State of Rhode Island
Department of State - Business Services Division

STAMP

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.

1. Entity ID Number	2. Exact name of the Corporation
001732657	Rhody Elite Mafia
3. State of Incorporation	**5. Brief description of the character of business conducted in Rhode Island**
RI	Youth Sports
4. NAICS Code	
711211	

6. Principal Office Address	City	State	Zip
8 Pine St	Cranston	RI	02910

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name	Vice-President Name
Julio A. Adorno	Jeremy Green
Street Address: 8 Pine St	Street Address: 61 Lebrun AVE
City: Cranston / State: RI / Zip: 02910	City: Woonsocket / State: RI / Zip: 02895
Secretary Name: Glenda Correctjer	**Treasurer Name:** Leighton Ogaldez
Street Address: 8 Pine St	Street Address: 190 Atwells Ave
City: Cranston / State: RI / Zip: 02910	City: Providence / State: RI / Zip: 02903

8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. — Check the box to indicate an attachment ☐

Director Name	Director Name
Julio A Adorno	Leighton Ogaldez
Street Address: 8 Pine St	Street Address: 190 Atwells Ave
City: Cranston / State: RI / Zip: 02910	City: Providence / State: RI / Zip: 02903
Director Name: Jeremy Green	**Director Name**
Street Address: 61 Lebrun Ave	Street Address
City: Woonsocket / State: RI / Zip: 02895	City / State / 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.

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

Name of Officer/Authorized Representative	Date
Julio A Adorno	3/24/25

Signature of Officer/Authorized Representative: Julio A Adorno

FILED
MAR 24 2025
BY 2L165
3:44 pm. AA.

MAIL TO:
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