	State of Rhode Office of the Secreta		Fee: \$20.00	
	Division Of Busines	s Services		
	148 W. River S			
1426	Providence RI 029			
1030	(401) 222-30	40		
Non-Profit Corporation				
Annual Report Filing Period: February 1 - May	, 1			
In accordance with R.I.G.L. 7-6 annual report within the time pr penalty fee of \$25.00.				
ANNUAL REPORT YEAR - EN	TER THE CURRENT YEAR 2	025 : <u>2025</u>		
1. Corporate ID No. 00005	55867			
2. Name of Corporation Johnston Adult Sports Association				
3. State of Incorporation				
State: <u>RI</u>				
	NAICS CODE			
Using the dropdown labeled N primary type of activity in whic populate a NAICS Code based box on the right. For further as	ch your entity engages. The d on the chosen selection. If	box to the right of the di the NAICS Code is know	ropdown will	
NAICS Code				
<u>813319</u>				
4. Principal Office Address				
No. and Street: 1583 HAR	RTFORD AVENUE			
City or Town: JOHNST		tate: <u>RI</u> Zip: <u>02919</u>	Country: <u>USA</u>	
5. Brief Description of the Ch	aracter of the Affairs Condu	icted in Rhode Island		
THE ONGOING PROMOT	ION AND FUNDING OF	SPORTS PROGRAMS	S AND EVENTS.	
6. Names and Addresses of t	he Officers and Directors:			
All Directors and Officers mu Island Corporation shall not		e number of DIRECTOR	रS of a Rhode	
Title	Individual Name	Addre		
<u> </u>	First, Middle, Last, Suffix	Address, City or Town, Stat	e, Zip Code, Country	

PRESIDENT	MICHAEL BEDROSIAN	22 ATWELLS AVE JOHNSTON, RI 02919 USA	
TREASURER	ROBERT CIVETTI	7 TEABERRY LANE JOHNSTON, RI 02919 USA	
SECRETARY	NICOLE COURNOYER	1 WINSOR AVENUE JOHNSTON, RI 02919 USA	
VICE PRESIDENT	VINCENT JACKVONY JR	30 HARRINGTON AVE HOPE, RI 02831 USA	
DIRECTOR	NICOLE COURNOYER	1 WINSOR AVW JOHNSTON, RI 02919 USA	
DIRECTOR	VINCENT JACKVONY JR	30 HARRINGTON AVE HOPE, RI 02831 USA	
DIRECTOR	MICHAEL BEDROSIAN	22 ATWELLS AVE JOHNSTON, RI 02919 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

VINCENT JACKVONY, JR. 1583 HARTFORD AVENUE JOHNSTON, RI 02919

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

Signed this 15 Day of April, 2025 at 9:04:18 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 VINCENT JACKVONY, JR

Signature of Authorized Person

Form No. 631 Revised 09/07

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