

**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.** 000071820**2. Name of Corporation** GBC ASSOCIATION**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

713990**4. Principal Office Address**No. and Street: P.O. BOX 5627City or Town: WAKEFIELD State: RI Zip: 02880 Country: USA**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**TO OWN AND OPERATE A BEACH CLUB FOR THE PURPOSE OF PROVIDING SOCIAL AND RECREATIONAL ACTIVITIES FOR ITS MEMBERS.**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	JOHN BATISTA	128 WINDMILL DRIVE WAKEFIELD, RI 02879 USA
TREASURER	RON PELLETIER	889 HOPKINS HILL RD WAKEFIELD, RI 02817 USA
SECRETARY	JENNIFER TORBETT	813 MOORSEFIELD ROAD SAUNDERSTOWN, RI 02874 USA
PAST PRESIDENT	JAMES FEROLITO	19 CAROL LANE NARRAGANSETT, RI 02882 USA
VICE PRESIDENT	KARA BELL	23 WHITE BIRCH COURT NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	LISA FIORE	74 KETTLE POND DRIVE SOUTH KINGSTOWN, RI 02879 USA
DIRECTOR	JAMES FERRY	155 SPARTINA COVE WAY WAKEFIELD, RI 02879 USA
DIRECTOR	TRACY BARAN	24 WARDLAW COURT PROVIDENCE, RI 02908 USA
DIRECTOR	MICHELLE OBRIEN	1069 SOUTH ROAD 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

MARGARET L. HOGAN, ESQ. 3949 OLD POST ROAD P.O. BOX 1719 CHARLESTOWN , RI 02813

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 June, 2025 at 6:16:41 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 CHRIS BYRNE
Signature of Authorized Person

Form No. 631
Revised 09/07