



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. 001678376

2. Name of Corporation Patriots Lax Boosters

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  
624110

4. Principal Office Address

No. and Street: 32 GENERAL SULLIVAN CIR

City or Town: PORTSMOUTH

State: RI Zip: 02871 Country: USA

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

FOR THE SUPPORT OF THE PORTSMOUTH HIGH SCHOOL (PHS) BOYS LACROSSE PROGRAM IN PORTSMOUTH RI

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	JILL COLNA	64 LISA TERRACE PORTSMOUTH, RI 02871 USA
TREASURER	NELL MELANSON	32 GENERAL SULLIVAN CIR PORTSMOUTH, RI 02871 USA
DIRECTOR	JEFFREY DIONNE	48 DIANNE LANE PORTSMOUTH, RI 02871 USA
DIRECTOR	LISA PELLETIER	17 ANN HUTCHINSON CT PORTSMOUTH, RI 02871 USA
DIRECTOR	TED GERSEN	123 LILAC LANE PORTSMOUTH, RI 02871 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**

MAX ESSERY 202 CHASE ROAD PORTSMOUTH , RI 02871

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

**Signed this 23 Day of July, 2025 at 2:26:41 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 JILL COLNA  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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