

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov/business

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014

Filing Period: June 1 - June 30 - This report must be typed or printed legibly.

Filing Fee: \$20.00 · FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 31616		2. Exact name of the Corporation Bridge Club of Rhode Island, Inc.					
3. State of Incorporation	n 4. Brief des Promot	Brief description of the character of business conducted in Rhode Island Promoting the game of duplicate bridge					
Rhode Island		-	- -				
5. Principal office addre			City	State	Zip		
400 Reservoir Avenue			Providence	RI	02907-3565		
S. LIST <u>ALL</u> OFFICER	S (NAMES AND ADDI	RESSES) ("X" BOX F					
President Name			Vice-President Name				
Gloria Manna			Kathleen Anderson				
Street Address 70 Harding Avenue			Street Address				
City	State	Zip	1 Wayland Ave., #108S City State Zip		Zip		
Johnston	RI	02919	Providence	RI	02906		
Secretary Name			Treasurer Name		02500		
Ann Broomfield			Richard H. Tropper				
Street Address			Street Address				
50 Cambria Ct.		21 Alan Avenue					
City	State	Zip	City	State	Zip		
Pawtucket	RI		Pascoag	RI	02859		
. LIST <u>ALL</u> DIRECTO! ("X" BOX FOR ATTA	RS (NAMES AND ADD CHMENT) []	PRESSES). RHODE IS	LAND CORPORATIONS <u>MUST</u> L	IST NO LESS THAN	THREE (3) DIRECT		
Director Name			Director Name				
Gloria Manna			Kathleen Anderson				
Street Address			Street Address				
'0 Harding Avenu			1 Wayland Ave., #10				
City Johnston	State RI	Zip 02919	City	State	Zip		
Pirector Name	<u> </u>	02313	Providence	RI	02906		
irector Name Inn Broomfield		Director Name Richard H. Tropper					
reet Address			Street Address				
50 Cambria Ct.			21 Alan Avenue				
ity	State	Zip	City	State	Zip		
awtucket	RI		Pascoag	RI	02859		
REGISTERED AGENT	T IN RHODE ISLAND	Nitroja in 1811.					
nis information is cur	rently of record in the	Office of the Secreta	ary of State. Changes require filir	ıg Form 641.			
			resident, Secretary, Assistant Secre		iver or Trustee		

File Date		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.		
Ву:	FILED	Signature of Officer	Date	
FOR SECRETARY OF STATE USE ONLY	4 100 pr	Gloria Manna		
PON SECRETARY OF STATE USE UNET		Print or Type Name of Officer		
orm No. 631	JUN 1 6 2014	President		
levised: 05/2012	DINOS	Title of Officer		