State of	of Rhode Island and Pro Office of the Secreta		Fee: \$20.00	
HODE	Division Of Business 148 W. River St Providence RI 0290 (401) 222-304	reet 4-2615		
TOPET	· · · ·			
Non-Profit Corporation Annual Report Filing Period: June 1 - June 30				
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: 2016				
1. Corporate ID No. 000992656				
2. Name of Corporation CHS AFJROTC CADET & UNIT BOOSTER				
3. State of Incorporation				
State: <u>RI</u>				
4. Corporate Address in Rhode Island				
No. and Street:45 RAWLINSON DRIVECity or Town:COVENTRYState: RIZip: 02816Country: USA				
5. Foreign Corporation. Enter Principal Office Address				
No. and Street:				
City or Town: State: Zip: Country:				
6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island				
TO RAISE AND DISTRIBUTE FUNDS TO SUPPLEMENT THE COVENTRY HIGH SCHOOL				
AFJROTC RI-081 UNITS EDUCATIONAL AND OPERATION EXPENSES, ENHANCING THE				
ACADEMIC GROWTUH AND EXPERIENCES OF EVERY CADET ENROLLED IN THE UNIT				
AND THE UNIT AS A WHOLE.				
7. Names and Addresses of the Officers and Directors:				
All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete				
THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23				
Title	Individual Name	Address		
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Co	ode, Country	
PRESIDENT	KAREN RAPOSA	95 WINDSOR PARK COVENTRY, RI 02816 US		

TREASURER	CANDICE ASSELIN	45 RAWLINSON DR COVENTRY, RI 02816 USA		
SECRETARY	CANDICE ASSELIN	45 RAWLINSON DR COVENTRY, RI 02816 US		
DIRECTOR	KAREN RAPOSA	95 WINDSOR PARK DRIVE COVENTRY, RI 02816 USA		
DIRECTOR	CANDICE ASSELIN	45 RAWLINSON DRIVE COVENTRY, RI 02816 USA		
CANDICE ASSELIN 45 RAWLINSON DRIVE COVENTRY RI 02816   9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.				
<b>Signed this 10 Day of June, 2016 at 12:38:20 PM by the authorized person.</b> <i>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.</i>				
By <u>CANDICE M ASSELIN</u> Signature of Authorized Person				
Form No. 631 Revised 09/07				
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