



**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 FILING YEAR **2023: 2023**

1. Corporate ID No. 001733441

2. Name of Corporation Ravenous Runners

3. State of Incorporation

State: RI

ARTICLE III

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
813212

4. Principal Office Address

No. and Street: 6 BARN DRIVE
City or Town: CUMBERLAND State: RI Zip: 02864 Country: USA

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

A GROUP OF PEOPLE WHO RUN TOGETHER, SUPPORT EACH OTHER'S RUNNING GOALS AND SUPPORT THE COMMUNITY THROUGH PHILANTHROPY AND FUNDRAISING FOR CHARITABLE ORGANIZATIONS.

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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
DIRECTOR	KIM CHULA MAGUIRE	6 BARN DRIVE CUMBERLAND, RI 02864 US
DIRECTOR	CONOR MAGUIRE	6 BARN DRIVE CUMBERLAND, RI 02864 USA
DIRECTOR	LISA MARCEAU	3384 DIAMOND HILL RD CUMBERLAND, RI 02864 USA
DIRECTOR	KIM CHULA-MAGUIRE	6 BARN DRIVE CUMBERLAND, RI 02864 USA
DIRECTOR	ROSEMARY TATRO GATELY	13 STAGECOACH RD CUMBERLAND, RI 02864 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

KIM CHULA MAGUIRE 6 BARN DRIVE CUMBERLAND , RI 02864

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

Signed this 1 Day of May, 2023 at 11:43:33 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 KIMBERLEY CHULA-MAGUIRE
Signature of Authorized Person

Form No. 631
Revised 09/07

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