



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: June 1 - June 30 • **Filing Fee:** \$20.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* 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.

1. Corporate ID No. <u>28322</u>		2. Name of Corporation <u>Friends of the Waterfront, Inc</u>			
3. State of Incorporation <u>Rhode Island</u>		4. Corporate address in Rhode Island - Street Address <u>51 Kay Blvd (P.O. Box 932)</u>		City <u>Newport</u>	Zip <u>02840</u>
5. Foreign corporation. Enter principal office address			City	State	Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island <u>maintaining a community association concerned with the direction + planning of the Newport waterfront to educate the public as to means of civic improvement and public access.</u>					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <u>James Perrier Cacting</u>			Vice President Name <u>DAVID Wixted</u>		
Street Address <u>41 Coggeshall Ave</u>			Street Address <u>42 Division St.</u>		
City <u>Newport</u>	State <u>RI</u>	Zip <u>02840</u>	City <u>Newport</u>	State <u>RI</u>	Zip <u>02840</u>
Secretary Name <u>Elizabeth Mathinos</u>			Treasurer Name <u>Linda S. Hammer</u>		
Street Address <u>111 Washington St.</u>			Street Address <u>51 Kay Blvd.</u>		
City <u>Newport</u>	State <u>RI</u>	Zip <u>02840</u>	City <u>Newport</u>	State <u>RI</u>	Zip <u>02840</u>
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name <u>Ruth Kiker</u>			Director Name <u>Roy Fitzherbert</u>		
Street Address <u>34 Howard St.</u>			Street Address <u>5 Marsh St.</u>		
City <u>Newport</u>	State <u>RI</u>	Zip <u>02840</u>	City <u>Newport</u>	State <u>RI</u>	Zip <u>02840</u>
Director Name <u>Victor Farmer</u>			Director Name <u>Sabrina Vietry</u>		
Street Address <u>19 Catherine St.</u>			Street Address <u>6 Dearborn St.</u>		
City <u>Newport</u>	State <u>RI</u>	Zip <u>02840</u>	City <u>Newport</u>	State <u>RI</u>	Zip <u>02840</u>
9. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78					

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

FILED
File Date <u>JUN 22 2009</u>
Check No.
By: <u>2301</u>
FOR SECRETARY OF STATE USE ONLY

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.

Linda S. Hammer 6/18/09
Signature of Officer Date
Linda S. Hammer
Print or Type Name of Officer
Treasurer
Title of Officer