



State of Rhode Island and Providence Plantations
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: 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: 2012

1. Corporate ID No. 000534216

2. Name of Corporation NEW ENGLAND SHIPS2REEFS, INC.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 2 MARLBOROUGH STREET

City or Town: NEWPORT

State: RI Zip: 02840 Country: 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

THIS CORPORATION IS ORGANIZED EXCLUSIVELY FOR SUPPORTING, MAINTAINING, AND FURTHERING SCIENTIFIC AND EDUCATIONAL PURPOSES INCLUDING BUT NOT LIMITED TO, THE CREATION OF MARINE BASED MAN MADE ARTIFICIAL REEFS. THIS CORPORATION IS ORGANIZED EXCLUSIVELY FOR ONE OR MORE PURPOSES AS SPECIFIED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, INCLUDING, FOR SUCH PURPOSES, AS SOLICITING AND RECEIVING GIFTS AND GRANTS OF MONEY AND PROPERTY, AND TO DO ANYTHING NECESSARY OR PROPER FOR ACCOMPLISHMENT OF THESE PURPOSES NOT OTHERWISE INCONSISTENT WITH SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. ALL FUNDS, WHETHER INCOME OR PRINCIPAL, AND WHETHER ACQUIRED BY GIFT OR CONTRIBUTION OR OTHERWISE, SHALL BE DEVOTED TO SAID PURPOSES.

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is no longer applicable; please delete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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	ROBERT MARK BROUSSEAU	825 VICTORY HIGHWAY MAPLEVILLE, RI 02839 USA
DIRECTOR	ROBERT MARK BROUSSEAU	825 VICTORY HIGHWAY MAPLEVILLE, RI 02839 USA
DIRECTOR	PATRICK MICHAEL HNTSCHELL	34 KENWOOD AVENUE WAKEFIELD, RI 02879 USA
DIRECTOR	RANDY NMN WIETMAN	28 SANFORD AVENUE NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	THOMAS NELSON FETHERSTON	680 WORDENS POND ROAD WAKEFIELD, RI 02879 USA
DIRECTOR	JESSE KENNETH DEAN RATHIER	650 BLACKHUT ROAD GLENDALE, RI 02825 USA
DIRECTOR	JOSEPH NMN WEATHERBY	2627STAPLES AVENUE KEY WEST, FL 33040 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

KEITH B. KYLE 2 MARLBOROUGH STREET NEWPORT , RI 02840

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

Signed this 20 Day of August, 2012 at 11:09:41 AM. *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 corporation, 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 ROBERT M. BROUSSEAU
Signature of Officer of the Corporation

President or Vice President or Secretary or Assistant Secretary or
 Treasurer or Receiver or Trustee (check one)

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.

Form No. 631
Revised 09/07
