



**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:** 2016

**1. Corporate ID No.** 000027781

**2. Name of Corporation** Ida Lewis Yacht Club, of Newport, R. I.

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: LIME ROCK - 170 WELLINGTON AVENUE  
P.O. BOX 479

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**

TO PROMOTE YACHTING IN NARRAGANSETT BAY AND PRESERVE LIMEROCK LIGHTHOUSE.

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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
PRESIDENT	ROBERT A CONNERNEY	9 RENFREW PARK MIDDLETOWN, RI 02842 USA
TREASURER	LOUISA BOATWRIGHT	46 SECOND STREET

		NEWPORT, RI 02840 USA
SECRETARY	STEPHEN J MACGILLIVRAY	230 THIRD BEACH ROAD MIDDLETOWN, RI 02842 USA
DIRECTOR	MATTHEW O KIRBY	51 ASHURST AVE MIDDLETOWN, RI 02842 USA
DIRECTOR	SIMON J DAVIDSON	10 COWSILL LANE NEWPORT, RI 02840 US
DIRECTOR	GARY H LASH	14 COMMONWEALTH AVE NEWPORT, RI 02840 US
DIRECTOR	DANIEL J FARIA	17 CIRCLE DRIVE MIDDLETOWN, RI 02842 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**

PAUL FLEMING LIME ROCK - WELLINGTON AVENUE P.O. BOX 479 NEWPORT , RI 02840

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

**Signed this 12 Day of May, 2016 at 1:24:58 PM 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 MARK S KELLNER  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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