



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. 000137437

2. Name of Corporation Fort Burnside Communication and Coastal Defense Museum

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 716 BEAVERTAIL ROAD
P.O. BOX 31

City or Town: JAMESTOWN

State: RI Zip: 02835 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

THE PRESERVATION, PRESENTATION AND INTERPRETATION OF THE HISTORY AND ASSOCIATED ARTIFACTS RELATED TO FORT BURNSIDE, RHODE ISLAND.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
SECRETARY	NEVILLE BEDFORD	32 BRISTOL FERRY RD BRISTOL, RI 02882 USA
PRESIDENT	M.W. BROWN BEEZER	716 BEAVERTAIL ROAD

		JAMESTOWN, RI 02835- USA
DIRECTOR	BARBARA MARTIN	21 BEACON STREET JAMESTOWN, RI 02835 USA
DIRECTOR	CHARLES DICECCA	501 MYSTIC VALLEY PKWY SOMERVILLE, MA 02144 USA
DIRECTOR	DALE GAGNON	9 DEAN AVE. BOW, NH 03304 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**

M.W. BROWN BEEZER 716 BEAVERTAIL ROAD JAMESTOWN , RI 02835

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

Signed this 30 Day of June, 2016 at 11:25:27 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 MW BROWN BEEZER
Signature of Authorized Person

Form No. 631
Revised 09/07

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