



**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: 2017

1. Corporate ID No. 000027616

2. Name of Corporation Newport Public Library

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

6

611110

4. Corporate Address in Rhode Island

No. and Street: 300 SPRING 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

PUBLIC LIBRARY

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	MICHAEL DAWSON	37 CUL DE SAC WAY PORTSMOUTH, RI 02871 USA
TREASURER	MICHAEL M. DUTTON	51 BATEMAN AVE. NEWPORT, RI 02840 USA
VICE PRESIDENT	JENNIFER BOOTH	15 CRANSTON AVE. NEWPORT, RI 02840 USA
PRESIDENT, FRIENDS OF THE LIBRARY	ADRIENNE HAYLOR	300 SPRING ST. NEWPORT, RI 02840 USA
DIRECTOR	PETER BAYLOR	44 PELHAM ST NEWPORT, RI 02840 USA
DIRECTOR	GINA BROWN	129C LAKE ERIE ST MIDDLETOWN, RI 02842 USA
DIRECTOR	MATTHEW LEYS	5 BARBARA ST NEWPORT, RI 02840 USA
DIRECTOR	SCOTT SKUNCIK	41 POWEL AVE NEWPORT, RI 02840 USA
DIRECTOR	STEPHEN WALUK	6 CONNECTION ST NEWPORT, RI 02840 USA
CITY COUNCIL LIAISON	LYNN CEGLIE	36 TILDEN AVE NEWPORT, RI 02840 USA
DIRECTOR	GIRARD A. GALVIN	1 PENNACOOK ST. NEWPORT, RI 02840 USA
DIRECTOR	ANGEL GONZALEZ	137 SWINBURNE ROW NEWPORT, RI 02840 USA
DIRECTOR	LINDA MARTIN	35 DUDLEY AVE. SOUTH MIDDLETOWN, RI 02842 USA
DIRECTOR	RITA SLOM	400 BELLEVUE AVE. NEWPORT, RI 02840 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

REGINA E. SLEZAK 300 SPRING STREET 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 22 Day of June, 2017 at 7:58:47 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 ANNETT LOVE
 Signature of Authorized Person

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