RI SOS Filing Number: 201746586140 Date: 6/27/2017 7:16:00 PM



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

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. 000143629
- 2. Name of Corporation Clouds Hill Victorian House Museum
- 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 <u>click here.</u>

NAICS Code

6

Fee: \$20.00

712110

4. Corporate Address in Rhode Island

No. and Street: 4157 POST ROAD, PO BOX 522

City or Town: EAST GREENWICH State: RI Zip: 02818 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 OWN AND OPERATE A HISTORICAL VICTORIAN HOME AS A MUSEUM FOR THE PUBLIC

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
SECRETARY	CHRISTINE E. CABRAL	4157 POST ROAD, PO BOX 522 EAST GREENWICH, RI 02818 USA
DIRECTOR	CHRISTINE E. CABRAL	4157 POST ROAD, P.O. BOX 522 EAST GREENWICH, RI 02818
PRESIDENT	ANNE D HOLST	4157 POST ROAD, P.O. BOX 522 EAST GREENWICH, RI 02818- USA
VICE PRESIDENT	WAYNE A. CABRAL	4157 POST ROAD, PO BOX 522 EAST GREENWICH, RI 02818 USA
DIRECTOR	GLENN PLACE	PO BOX 522 EAST GREENWICH, RI 02818 USA
DIRECTOR	ANNE D. HOLST	4157 POST ROAD, PO BOX 522 EAST GREENWICH, RI 02818 USA
DIRECTOR	HENRY A. L. BROWN	PO BOX 522 EAST GREENWICH, RI 02818 USA
DIRECTOR	WAYNE A. CABRAL	4157 POST ROAD, PO BOX 522 EAST GREENWICH, RI 02818 USA
DIRECTOR	JOSEPH DIPIETRO ESQ.	PO BOX 522 EAST GREENWICH, RI 02818 USA
DIRECTOR	STEPHEN A. CARDI	PO BOX 522 EAST GREENWICH, RI 02818 USA
DIRECTOR	MARJORIE B. CATANZARO	PO BOX 522 EAST GREENWICH, RI 02818 USA
DIRECTOR	APRIL BRUNELLE	PO BOX 522 EAST GREENWICH, RI 02818 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

ADLER POLLOCK & SHEEHAN P.C. ONE CITIZENS PLAZA, 8TH FLOOR PROVIDENCE, RI 02903

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

Signed this 27 Day of June, 2017 at 7:19:46 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 <u>CHRISTINE E. CABRAL</u> Signature of Authorized Person

Form No. 631 Revised 09/07