RI SOS Filing Number: 201746805980 Date: 6/28/2017 4:00:00 PM

<b>(B)</b>

State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

Annual Report for the year:	2017
Non-Profit Corporation	

- → Filing period: June 1 June 30 → Filing Fee: \$20.00 → Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number	12 Event nor	an of the Comment				
000314193	1	2. Exact name of the Corporation				
	Salt Marsh	Opera Company				
3. State of Incorporation		Brief description of the character of business conducted in Rhode Island				
СТ		Providers of locally produced, high quality opera to foster an appreciation for opera through performance and educational activities.				
4. NAICS Code	performanc	e and educationa	i activities.			
711110	<b>⊡</b>					
6. Principal Office Address		<del>-</del>	City	State	Zip	
65 Cutler Street			Stonington	CT 06378		
7. List ALL officers (names and	addresses)			Check the box to indicate	an attachment	
President Name Tig Conger		Vice-President Name Michele Delmhorst				
Street Address 75 Latimer Point Road		Street Address 173 Elm Street				
City Stonington	State CT	Zip 06378	City Stonington	State CT	<sup>Zip</sup> 06378	
Secretary Name Daniel Hall		Treasurer Name Isabelia Z	Treasurer Name Isabella Zagare			
Street Address 62 Cove Road			Street Address 6 Donross Drive			
City Stonington	State CT	<sup>Zip</sup> 06378	City Westerly	State RI	Zip 02891	
8. List ALL directors (names and	l addresses). RI (	Corporations MUST	list at least THREE directors.	Chapt the hey to indic	-to an attachment <b>X</b>	
Director Name Wilma Asch		Director Name Arthur Cot	Check the box to indicate an attachment Director Name  Arthur Cottrell			
Street Address 29 Edwards Road			Street Address 175 East Avenue			
City Old Saybrook	State CT	Zip <b>06475</b>	City Westerly	State RI	<sup>Zip</sup> 02891	
Discotor None		00475			02891	
Matthew McCaul	ey		Director Name Emily Mug	ge		
Street Address 29-1 Cottage Street		Street Address 89 Noyes Neck Road				
City New London	State CT	Zip 06320	City Westerly	State RI	<sup>Zip</sup> 02891	
<ol><li>Registered Agent in Rhode Isl</li></ol>	and. This informati	on is currently of reco	ord in the Department of State. Ch	anges require filing Form 64	1.	
Under penalty of perjury, I dec statements, and that all statem				accompanying schedu	les and	
This report must be signed by either the P				Representative, Receiver or Trus	tee.	
Name of Officer/Authorized Representative			····	Date		
Isabella Zagare			***	6/26/17		
Signature of Officer/Authorized R	epresentative		FILE	D		
<del>-/</del>						

MAIL TO:

**Division of Business Services** 

148 W. River Street. Providence, Rhode Island 02904-2615



## 65 Cutler Street, PO Box 227, Stonington, CT 06378

TEL: 860.535.3456

E-MAIL: INFO@SALTMARSHOPERA.ORG

WWW.SALTMARSHOPERA.ORG

## 8. CONTINUED

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## **BOARD OF TRUSTEES INFORMATION**

Additional:					
Name:	Kathy Conger				
Address:	75 Latimer Point Road				
	Stonington, CT 06378				
Name:	Simon Holt				
	Artistic Director/General Manager				
Address:	39 Prentice Williams Road Stonington, CT 06378				

FILED

JUN 2 8 2017 US