



**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. 000065066

2. Name of Corporation NOPE'S ISLAND CONSERVATION ASSOCIATION

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
813312

4. Corporate Address in Rhode Island

No. and Street: 4 WAWALOAM DRIVE
City or Town: WESTERLY State: RI Zip: 02891 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

PRESERVING THE BARRIER BEACH.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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 |
|----------------|---|---|
| DIRECTOR | STEARNS J BRYANT JR | 45 HAVERSHAM ROAD WESTERLY, RI 02891 USA |
| DIRECTOR | HARVEY C PERRY | 12 MARGIN STREET WESTERLY, RI 02891 USA |
| TREASURER | DAVID M BYERLY | 27 CHAPMAN ROAD WEEKAPAUG, RI 02891 USA |
| DIRECTOR | SCOTT WAKEMAN | 86 NOYES NECK ROAD WEEKAPAUG, RI 02891 USA |
| DIRECTOR | LANGDON HEMINWAY | 103A MOHAWK TRAIL CHARLESTOWN, RI 02891 USA |
| DIRECTOR | SUSAN KELLY | 1 PASSPATAUG AVE. WEEKAPAUG, RI 02891 USA |
| DIRECTOR | MARTHA M. HOSP | 12 WAXCADOWA AVE. WEEKAPAUG, RI 02891 USA |
| DIRECTOR | JACK MCALLISTER | 119 SHIRLEY DRIVE CHARLESTOWN, RI 02891 USA |
| DIRECTOR | WILLIAM L.G. LESTER | 36 WILLIAMS AVENUE WEEKAPAUG, RI 02891 USA |
| VICE PRESIDENT | ROBERT M. BYRNES | 570 LAKE AVENUE GREENWICH, CT 06830 USA |
| DIRECTOR | RICHARD GREGORY | 53 ROSSINI ROAD WESTERLY, RI 02891 USA |
| PRESIDENT | THOMAS M. LLOYD JR. | 88 DONIZETTI ROAD WESTERLY, RI 02891 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

JEANNE M. MCANDREW 4 WAWALOAM DRIVE WEEKAPAUG , RI 02891

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

Signed this 29 Day of June, 2017 at 2:02:25 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 THOMAS M. LLOYD JR.
Signature of Authorized Person

