RI SOS Filing Number: 201868840450 Date: 6/7/2018 4:00:00 PM

State of Rhode Island and Providence Plantations
Department of State - Business Services Division

STAMP

Annual Report for the year: 2018
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	2. Exact name of the Corporation
792443	NATHANAEL GREENE MONUMENT FOUNDATION, INC.
3. State of Incorporation: RHODE ISLAND	5. Brief description of the character of business conducted in Rhode Island: TO ERRECT AND MAINTAIN A STATUARY MONUMENT IN HONOR OF MAJOR GENERAL NATHANAEL GREENE AT THE VILLAGE OF ANTHONY, COVENTRY, R.I.
4. NAICS Code: 813990 - Other Similar Organ	

6. Principal Office Address	City	State	Zip
1035 MAIN STREET	COVENTRY	RI	02816

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name: JOEL G. JOHNSON			Vice-President Name: ROBERT A. DIPADUA, SR.		
Street Address: 164 GOUGH AVENUE			Street Address: 62 LAUREL AVENUE		
City: COVENTRY	State: RI	Zip: 02816	City: COVENTRY	State: RI	Zip: 02816
Secretary Name: CHARLES M. VACCA, JR.			Treasurer Name: RODNEY R. BAILLARGEON		
Street Address: 124 FAIRWAY DRIVE			Street Address: 46 LEIGHAS LANE		
City: COVENTRY	State: RI	Zip: 02816	City: COVENTRY	State: RI	Zip: 02816

8. List ALL directors (names and addresses). RI Corporations **MUST** list at least **THREE** directors. — Check the box to indicate an attachment ☐

Director Name: JOEL G. JOHNSON			Director Name: ROBERT A. DIPADUA, SR.		
Street Address: 164 GOUGH AVENUE			Street Address: 62 LAUREL AVENUE		
City: COVENTRY	State: RI	Zip: 02816	City: COVENTRY	State: RI	Zip: 02816
Director Name: CHARLES M. VACCA, JR.			Director Name: RODNEY R. BAILLARGEON		
Street Address: 124 FAIRWAY DRIVE			Street Address: 46 LEIGHAS LANE		
City: COVENTRY	State: RI	Zip: 02816	City: COVENTRY	State: RI	Zip: 02816

9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

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

Name of Officer/Authorized Representative	Date
JOEL G. JOHNSON	June 4, 2018

Signature of Officer/Authorized Representative: Joel G. Johnson

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MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FORM 631 - Revised: 11/2017

NATHANAEL GREENE MONUMENT FOUNDATION ADDITIONAL BOARD OF DIRECTORS 2018

ARTHUR G. CAPALDI, ESQ.
1035 MAIN STREET
COVENTRY, R.I. 02816

SHEILA M. KANE
58 INDIAN TRAIL
COVENTRY, R.I. 02816

R. DAVID GERVAIS
300 ABBOTTS CROSSING ROAD
COVENTRY, R.I. 02816