RI SOS Filing Number: 201870926780 Date: 6/28/2018 8:28:00 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: 2018

- 1. Corporate ID No. 000064598
- 2. Name of Corporation Friends of the Norman Bird Sanctuary
- 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

813312

4. Corporate Address in Rhode Island

No. and Street: 583 THIRD BEACH ROAD

City or Town: MIDDLETOWN State: RI Zip: 02842 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

AS TRUSTEE OF THE NORMAN BUD SANCTUARY MAINTAINING ITS WILDLIFE PRESERVE AND DEVELOPMENT AND PROVIDING FOR THE PUBLIC PROGRMS IN ENVIRONMENTAL EDUCATION

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Incorporator is no longer applicable; please delete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 Address, City or Town, State, Zip Code, Country		
	First, Middle, Last, Suffix			
TREASURER	TED STURTEVANT	5 THIRD ST		
		MIDDLETOWN, RI 02842 US		
TREASURER	BEV MURPHY	1416 WAPPING RD		
		MIDDLETOWN, RI 02842 US		
SECRETARY	JULIE DIBARI	5 FRIENDSHIP PL		
		NEWPORT, RI 02871 US		
PRESIDENT	ANNE HOWELL	440 040 HUEST WAY		
		110 SACHUEST WAY MIDDLETOWN, RI 02842 US		
VICE PRESIDENT	MICHELE FOOTED	WIIDDEE FOWN, IXI 02042 00		
	MICHELE FOSTER	111 GLEN ROAD		
		PORTSMOUTH, RI 02871 US		
DIRECTOR	ELIOT RAYMOND	163 RIVERVIEW AVE		
		MIDDLETOWN, RI 02842 USA		
DIRECTOR	MARY ALICE SMITH	397 GIBBS AVENUE APT 3		
		NEWPORT, RI 02840 USA		
DIRECTOR	KIM FULLER	, 		
	KIW I OLLLIN	150 FOREST AVE		
		MIDDLETOWN, RI 02842 USA		
DIRECTOR	PAT GALUSKA	7 BLACKWELL PLACE		
		NEWPORT, RI 02840 US		
DIRECTOR	JEFFREY MONIZ	21 LOCK LANE		
		PORTSMOUTH, RI 02871 US		
DIRECTOR	ABIGAIL ROWE	a culte terrace		
		8 CLIFF TERRACE NEWPORT, RI 02840 US		
		NEWPORT, RT 02040 05		

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

NATASHA HARRISON 583 THIRD BEACH ROAD MIDDLETOWN, RI 02842

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

Signed this 28 Day of June, 2018 at 8:32:32 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 NATASHA HARRISON
Signature of Authorized Person

Form No. 631 Revised 09/07