



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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.

FILED

JUL 09 2018

BY

1813

1. Entity ID Number 001662004		2. Exact name of the Corporation V Northeast Fishery Sector Inc			
3. State of Incorporation Massachusetts		5. Brief description of the character of business conducted in Rhode Island A non-profit commercial fishing cooperative.			
4. NAICS Code 813990 - Other Similar Organizati					
6. Principal Office Address 35 Erica Court			City West Kingstown	State RI	Zip 02892
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Christopher Brown			Vice-President Name		
Street Address 35 Erica Court			Street Address		
City West Kingstown	State RI	Zip 02892	City	State	Zip
Secretary Name Daniel Salerno			Treasurer Name Frederick Mattera		
Street Address 54 Merrifield Road			Street Address 55 State Street		
City Limington	State ME	Zip 04049	City Narragansett	State RI	Zip 02882
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Christopher Brown			Director Name Frederick Matterea		
Street Address 35 Erica Court			Street Address 55 State Street		
City West Kingstown	State RI	Zip 02892	City Narragansett	State RI	Zip 02882
Director Name Rodman Sykes			Director Name Robert Westcott		
Street Address 1974 Ministerial Road			Street Address 4972 Tower Hill Road		
City South Kingstown	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
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.					
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</small>					
Name of Officer/Authorized Representative Daniel J Salerno				Date June 7, 2018	
Signature of Officer/Authorized Representative 					