



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:** 2019

**1. Corporate ID No.** 000077095

**2. Name of Corporation** RHODE ISLAND NATURAL HISTORY SURVEY, INC.

**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

6

813312

**4. Corporate Address in Rhode Island**

No. and Street: BLDG. 14, URI - EAST FARM

City or Town: KINGSTON

State: RI Zip: 02881 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**

ORGANIZED EXCLUSIVELY FOR CHARITABLE PURPOSES.

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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.*

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	EMILIE HOLLAND	RIDOT, 2 CAPITOL HOLL RM 368 PROVIDENCE, RI 02908 USA
TREASURER	STAN TRAGAR	115 HARTSHORN ROAD PROVIDENCE, RI 02906 USA
SECRETARY	ROBERT D KENNEY	53 CRESTWOOD DRIVE NARRAGANSETT, RI 02882 USA
DIRECTOR	HOWARD GINSBERG	USGS PATUXENT WILDLIFE RS CTR, 211 WOODWARD HALL, URI KINGSTON, RI 02881 USA
DIRECTOR	LOU PERROTTI	ROGER WILLIAMS PARK ZOO, 1000 ELMWOOD AVENUE PROVIDENCE, RI 02905 USA
VICE PRESIDENT	STEPHEN HALE	116 FERRY ROAD SAUNDERSTOWN, RI 02874 USA
DIRECTOR	KEITH T. KILLINGBECK	URI DEPT OF BIOLOGICAL SCIENCES, RANGER HALL KINGSTON, RI 02881 USA
DIRECTOR	KIM GAFFETT	PO BOX 640 BLOCK ISLAND, RI 02807 USA
DIRECTOR	MALIA SCHWARTZ	65 MOOSUP VALLEY RD FOSTER, RI 02825 USA
DIRECTOR	NANCY KARRAKER	1686 SOUTH ROAD KINGSTON, RI 02881 USA
DIRECTOR	PETER V. AUGUST	URI DEPT. NAT RESOURCES SCIENCES, 1 GREENHOUSE RD KINGSTON, RI 02881 USA
DIRECTOR	SARAH GAINES	3172 TOWER HILL ROAD WAKEFIELD, RI 02879 USA
DIRECTOR	MARTIN WENCEK	676 MIDDLEBRIDGE ROAD WAKEFIELD, RI 02879 USA
DIRECTOR	SCOTT BUCHANAN	2 CENTRAL STREET NEWPORT, RI 02840 US
DIRECTOR	HUGH MARKEY	16 WHISPERING PINES ROAD RICHMOND, RI 02898 USA
DIRECTOR	BRYAN OAKLEY	9 SALEM STREET WESTERLY, RI 02891 USA
DIRECTOR	JONATHAN SCOONES	16 HAZARD STREET WAKEFIELD, RI 02879 USA
DIRECTOR	DENNIS SKIDDS	179 LIBERTY ROAD EXETER, RI 02822 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**

CHRISTOPHER H. LITTLE ONE FINANCIAL PLAZA, 26TH FLOOR PROVIDENCE , RI 02903

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

**Signed this 15 Day of May, 2019 at 12:28:20 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 EMILIE HOLLAND  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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