



**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.** 000081205

**2. Name of Corporation** NORTHEAST ARC USERS GROUP-NEARC

**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

813920

**4. Corporate Address in Rhode Island**

No. and Street: 1050 MAIN STREET

SUITE 6

City or Town: EAST GREENWICH

State: RI

Zip: 02818

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**

TO PROVIDE AN EDUCATIONAL FORUM AND INFORMATION EXCHANGE FOR GIS  
USERS IN NORTHEAST U.S.

**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**Incorporator is no longer applicable; please delete**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**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
DIRECTOR	KATIE GRILLO	831 MASSACHUSETTES AVE CAMBRIDGE, MA 02139 USA
DIRECTOR	STEPHANIE HEADMAN	71 WHITE MOUNTAIN DR CAMPTON, NH 03223 USA
DIRECTOR	BRITTANY HOFFNAGLE	107 WATERHOUSE RD BOURNE, MA 02532 USA
TREASURER	ESTHER OLSON-MURPHY	6 LIBERTY LANE WEST HAMPTON, NH 03842 USA
SECRETARY	MIKE DOYLE	30 MILL LN BRIMFIELD, MA 01010 USA
PRESIDENT	EMILY WILSON	1066 SAYBROOK RD HADDAM, CT 06438 USA
DIRECTOR	PAM BRANGAN	110 WEST CANAL ST, SUITE 202 WINOOSKI, VT 05404 USA
ASSISTANT SECRETARY	WILLIAM A DILIBERO ESQ	1050 MAIN STREET, SUITE 6 EAST GREENWICH, RI 02818 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**

WILLIAM A. DILIBERO 1050 MAIN STREET, SUITE 6 EAST GREENWICH , RI 02818

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

**Signed this 17 Day of June, 2019 at 9:48:35 AM 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 ESTHER OLSON-MURPHY  
Signature of Authorized Person

Form No. 631  
Revised 09/07