



Department of State - Business Services Division

FILED

JUN 27 2019 *ov*

RY - *14600*

Annual Report for the year: **2019**

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 30982		2. Exact name of the Corporation Rhode Island Shellfisherman's Association Inc.			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Monitoring environmental, regulatory, and legislative issues related to commercial shellfishing. Promotion and education projects involving shellfishing and shellfish products.			
4. NAICS Code 813910 - Business Associati <input type="checkbox"/>					
6. Principal Office Address 130 Lincoln St.		City North Kingstown	State RI	Zip 02852-1220	
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Michael McGiveney			Vice-President Name David Ghigliotty		
Street Address 62 East Shore Dr.			Street Address 64 Larchmont Rd.		
City Warwick	State RI	Zip 02816	City Warwick	State RI	Zip 02886
Secretary Name Bruce Eastman			Treasurer Name Bruce Eastman		
Street Address 130 Lincoln St.			Street Address 130 Lincoln St.		
City North Kingstown	State RI	Zip 02852-1220	City North Kingstown	State RI	Zip 02852-1220
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 Joseph Amato			Director Name Steven DiPetrillo		
Street Address 51 Harrop Ave.			Street Address 13 Lakeview Dr.		
City Warwick	State RI	Zip 02886	City Johnston	State RI	Zip 02919
Director Name David Esau			Director Name Gregory Bassett		
Street Address 165 Pequot Tr.			Street Address 20 Brook Spring Dr.		
City East Greenwich	State RI	Zip 02818	City Warwick	State RI	Zip 02889
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.					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative Bruce Eastman				Date 6/19/19	
Signature of Officer/Authorized Representative Bruce W. Eastman					

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

RHODE ISLAND SHELLFISHERMAN'S ASSOCIATION INC
130 LINCOLN ST.
NORTH KINGSTOWN, RI 02852-1220

Corporate ID #30982

Attachment of additional directors for 2019 corporate filing

Jeffrey Grant
11 Rita St.
Warwick, RI 02889

Adam McGiveney
116 Auburn St.
Cranston, RI 02910-2847

John Harvey
89 Alden Ave.
Warwick, RI 02889

William Blank
48 Sheryl Circle
Warwick, RI 02818