



**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. 000145386

2. Name of Corporation BLACKSTONE RIVER WATERSHED COUNCIL

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: C/O JOHN MARSLAND

P.O. BOX 8068

City or Town: CUMBERLAND

State: RI Zip: 02864 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

STEWARDSHIP OF THE BLACKSTONE RIVER AND ITS WATERSHED IN ACCORDANCE WITH THE PROVISIONS OF THE RHODE ISLAND RIVERS COUNCIL AND PURSUANT TO SECTION 46-28-8 OF RI GENERAL LAWS.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JOHN MARSLAND	6 VALLEY STREAM DRIVE CUMBERLAND, RI 02864 USA
TREASURER	ERIC M LISTENFELT	388 VOSE ST UNIT 3 WOONSOCKET, RI 02895 USA
SECRETARY	SUZANNE MATTA	230 LITTLE POND COUNTY RD CUMBERLAND, RI 02864 USA
VICE PRESIDENT	MICHAEL SCALZI	170 PROVIDENCE PIKE NORTH SMITHFIELD, RI 02896 USA
DIRECTOR	FRED RUGO	11 OBELINE DR NORTH SMITHFIELD, RI 02896 USA
DIRECTOR	NICHOLAS WENTZELL	3 BROADVIEW AVE CUMBERLAND, RI 02864 USA
DIRECTOR	FRANK MATTA	230 LITTLE POND COUNTY ROAD CUMBERLAND, RI 02864 USA
DIRECTOR	JUDY HADLEY	6 EDGEHILL AVENUE LINCOLN, RI 02865 USA
DIRECTOR	KEVIN BURNS	1 HOPE STREET CUMBERLAND, RI 02864 USA
DIRECTOR	RAYMOND PADO	314 HIGH STREET CUMBERLAND, RI 02864 USA
DIRECTOR	KEITH HAINLEY	50 SIDNEY AVENUE WOONSOCKET, RI 02895 USA
DIRECTOR	ROBERT CHARPENTIER	2 ROBERTS STREET HARRISVILLE, RI 02830 USA
DIRECTOR	ARTHUR PLITT	44 COOKE STREET PAWTUCKET, RI 02860 USA
DIRECTOR	RANDY TUOMISTO	411 RESERVOIR ROAD CUMBERLAND, RI 02864 USA
DIRECTOR	ALICE CLEMENTE	PO BOX 7771 CUMBERLAND, RI 02864 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

FRANK MATTA 230 LITTLE POND COUNTY ROAD CUMBERLAND , RI 02864

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

Signed this 7 Day of July, 2019 at 11:12:13 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 ERIC LISTENFELT

Signature of Authorized Person

Form No. 631
Revised 09/07

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