



**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.** 001654178

**2. Name of Corporation** The Portuguese Discovery Monument Foundation

**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

813990

**4. Corporate Address in Rhode Island**

No. and Street: 1100 AQUIDNECK AVENUE

City or Town: MIDDLETOWN

State: RI Zip: 02842 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 PROMOTE THE RENOVATION, RESTORATION, RECONSTRUCTION, CONSTRUCTION, ESTABLISHMENT AND MAINTENANCE OF A MONUMENT TO THE PORTUGUESE NAVIGATORS AS LOCATED AT BRENTON POINT PARK, NEWPORT, RHODE ISLAND AND TO PROMOTE AND CULTIVATE PORTUGUESE CULTURE, HERITAGE, TRADITIONS, AND CUSTOMS BY CONDUCTING AND SUPPORTING FUNCTIONS AND EVENTS TO ENHANCE THE AWARENESS OF PORTUGUESE HERITAGE, CULTURE AND CUSTOMS, IN GENERAL; AND ADDITIONALLY TO USE THE

FUNDS OF THE FOUNDATION, IN THE DISCRETION OF THE BOARD OF DIRECTORS, AS GENERATED FROM ITS ACTIVITIES AND FROM PRIVATE OR PUBLIC SOURCES, FOR CHARITABLE SUPPORT OF OTHER ORGANIZATIONS THAT ARE EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE.

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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<br>First, Middle, Last, Suffix | Address<br>Address, City or Town, State, Zip Code, Country |
|----------------|------------------------------------------------|------------------------------------------------------------|
| PRESIDENT      | ROBERT M SILVA                                 | 8 CIRCLE DRIVE<br>MIDDLETOWN, RI 02842 USA                 |
| TREASURER      | JOSEPH G DIAS                                  | 106 RUGGLES AVENUE<br>NEWPORT, RI 02840 USA                |
| SECRETARY      | HELEN M MATHIEU                                | 25 OLD BEACH ROAD<br>NEWPORT, RI 02840 USA                 |
| VICE PRESIDENT | JAMES J REED                                   | 8 LOYOLA TERRACE<br>NEWPORT, RI 02840 USA                  |
| DIRECTOR       | JAMES J REED                                   | 8 LOYOLA TERRACE<br>NEWPORT, RI 02840 USA                  |
| DIRECTOR       | HELEN M MATHIEU                                | 25 OLD BEACH ROAD<br>NEWPORT, RI 02840 USA                 |
| DIRECTOR       | JOSEPH G DIAS                                  | 106 RUGGLES AVENUE<br>NEWPORT, RI 02840 USA                |
| DIRECTOR       | ROBERT M SILVA                                 | 8 CIRCLE DRIVE<br>MIDDLETOWN, RI 02842 USA                 |
| DIRECTOR       | LEONEL RODRIGUES TEIXEIRA                      | 575 EAST AVENUE<br>PAWTUCKET, RI 02860 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**

ROBERT M. SILVA, ESQ. 1100 AQUIDNECK AVENUE MIDDLETOWN , RI 02842

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

**Signed this 9 Day of September, 2019 at 1:09:15 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 ROBERT M. SILVA  
Signature of Authorized Person

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