



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year:

Non-Profit Corporation

2020

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

FILED

JUN 01 2020

BY

1. Entity ID Number 30725		2. Exact name of the Corporation THE RHODE ISLAND PUBLICATIONS SOCIETY			
3. State of Incorporation RHODE ISLAND		5. Brief description of the character of business conducted in Rhode Island SCHOLARSHIP IN RI HISTORY, PUBLISHING MANUSCRIPTS AS CONTRIBUTIONS TO RI HISTORY			
4. NAICS Code 624229					
6. Principal Office Address 1445 WAMPANOAG TRAIL, SUITE 201			City EAST PROVIDENCE	State RI	Zip 02915
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name DR. PATRICK T. CONLEY			Vice-President Name RUSSELL J. DESIMONE		
Street Address ONE BRISTOL POINT ROAD			Street Address 20 BARTLETT ROAD		
City BRISTOL	State RI	Zip 02809	City MIDDLETOWN	State RI	Zip 02842
Secretary Name ANNA MARIA LOISELLE			Treasurer Name GAIL C. CONLEY		
Street Address 1445 WAMPANOAG TRAIL, SUITE #203			Street Address ONE BRISTOL POINT ROAD		
City EAST PROVIDENCE	State RI	Zip 02915	City BRISTOL	State RI	Zip 02809
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment ☒					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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.					
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee					
Name of Officer/Authorized Representative DR. PATRICK T. CONLEY, PRESIDENT				Date 5/28/20	
Signature of Officer/Authorized Representative 				SIGN DOCUMENT HERE	

MAIL TO:

Division of Business Services

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Website: www.sos.ri.gov

BOARD OF DIRECTORS
RHODE ISLAND PUBLICATIONS SOCIETY

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30725

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