



**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: 2020

1. Corporate ID No. 000029147

2. Name of Corporation Rhode Island Arts Foundation at Newport, Incorporated

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

711320

4. Corporate Address in Rhode Island

No. and Street: 26 VALLEY ROAD, SUITE 103

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

ANNUAL CLASSICAL MUSIC FESTIVAL HELD IN THE TURN OF THE CENTURY
MANSIONS OF NEWPORT DURING 16 DAYS IN JULY CORPORATION ORGANIZED
EXCLUSIVELY FOR CHARITABLE RELIGIOUS EDUCATIONAL AND SCIENTIFIC
PURPOSES WITHIN THE MEANING OF SECTION 501C3 OF 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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	SUZANNA LARAMEE	111 HARRISON AVE NEWPORT, RI 02840 USA
TREASURER	CRAIG SHAPERO	1816 EDGEHILL DRIVE ALEXANDRIA, VA 22307 USA
SECRETARY	LESLIE HOGAN	128 PROSPECT HILL STREET NEWPORT, RI 02840 USA
DIRECTOR	MELANIE NIEMIEC	1 EAST END AVENUE NEW YORK, NY 10075 USA
DIRECTOR	MELISSA FAIRGRIEVE	425 TUCKERMAN AVE MIDDLETOWN, RI 02842 USA
DIRECTOR	ANTHONY CARCIERI	42 BRIDGHAM FARM RD RUMFORD, RI 02916 USA
DIRECTOR	STEPHEN HUTTLER	17 ELIZABETH LN MIDDLETOWN, RI 02842 USA
DIRECTOR	JOHN WINKLEMAN	355 BLACKSTONE BLVD. APT 453 PROVIDENCE, RI 02906 USA
DIRECTOR	MICHAEL CONOVER	18 MOUNT VERNON ST NEWPORT, RI 02840 USA
DIRECTOR	MARILYN WOLOOHOJIAN	356 GOLFVIEW RD NORTH PALM BEACH, FL 33408 USA
DIRECTOR	PATRICIA PETERSON	6 AVENIR COURT BRISTOL, RI 02809 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**

ERIN M. METCALF 26 VALLEY ROAD, #103 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 8 Day of June, 2020 at 1:29:55 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 JOYCE LHEUREUX
Signature of Authorized Person

