



**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.** 000113797

**2. Name of Corporation** THE NEWPORT KIWANIS FOUNDATION OF NEWPORT, R.I., INC.

**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: 181 BELLEVUE AVENUE, UNIT 434

City or Town: NEWPORT

State: RI Zip: 02840 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 RAISE FUNDS FOR PROVIDING SCHOLARSHIPS AND AID TO NEEDY PERSONS  
PARTICULARLY CHILDREN AND ELDERLY

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	BARRY FORD	1 HAROLD LANE MIDDLETOWN, RI 02842 USA
TREASURER	JOHN S POPE	6 CANONCHET DRIVE PORTSMOUTH, RI 02871 USA
SECRETARY	KATHERINE PERROTTI	16 RUSSELL AVE NEWPORT, RI 02840 USA
DIRECTOR	P HAKAN DURUDOGAN	97 WEST MAIN RD MIDDLETOWN, RI 02842 USA
DIRECTOR	ROBERT SMITH	126 RUGGLES AVE NEWPORT, RI 02840 USA
DIRECTOR	GENE L PERROTTI	16 RUSSELL AVE NEWPORT, RI 02840 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 S. SMITH 181 BELLEVUE AVENUE, UNIT 434 P.O. BOX 1368 NEWPORT , RI 02840

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

**Signed this 13 Day of June, 2020 at 10:55:32 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 KATHERINE R PERROTTI  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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