



**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.** 000906413

**2. Name of Corporation** Clean Ocean Access

**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: 23 JOHNNY CAKE HILL

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**

CLEAN OCEAN ACCESS IS A NON-PROFIT CORPORATION AND SHALL BE OPERATED EXCLUSIVELY FOR CHARITABLE PURPOSES WITHIN THE MEANING OF SECTION 501 (C)(3) OF THE INTERNAL REVENUE CODE. THE MISSION OF CLEAN OCEAN ACCESS IS TO TAKE ACTION TODAY SUCH THAT FUTURE GENERATIONS CAN CONTINUE TO ENJOY OCEAN ACTIVITIES.

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	MONICA DEANGELIS	91 LILAC LANE PORTSMOUTH, RI 02871 USA
TREASURER	IAN ESTAPHAN OWEN	29 BUOY STREET JAMESTOWN, RI 02835 USA
SECRETARY	ANNIE BECKER	113 WELLINGTON AVENUE NEWPORT, RI 02840 USA
EXECUTIVE DIRECTOR (NON-VOTING)	DAVE MCLAUGHLIN	3 HASKELL AVENUE NEWPORT, RI 02840 USA
DIRECTOR	KARA DICAMILLO	7 CHESTNUT STREET NEWPORT, RI 02840 USA
DIRECTOR	JON BURR	63 1/2 HOUSTON AVENUE NEWPORT, RI 02840 USA
DIRECTOR	BARBARA FROST	64A KAY STREET 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**

DAVID MCLAUGHLIN 3 HASKELL AVENUE 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 19 Day of June, 2020 at 11:22:30 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 DAVE MCLAUGHLIN  
Signature of Authorized Person

Form No. 631  
Revised 09/07