



**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. 000133332

2. Name of Corporation OS Orchid Society

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: 377 SWITCH ROAD

City or Town: WOOD RIVER JUNCTION

State: RI

Zip: 02894

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 CREATE, PROMOTE, DEVELOP AND PRESERVE A GROUP DEDICATED TO THE APPRECIATION, ENHANCEMENT, GROWTH, EXCHANGE OF IDEAS, TECHNIQUES AND THEORIES OF ALL ASPECTS OF ORCHIDS

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Incorporator is no longer applicable; please delete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	NAOMI MITTELL	40 HAVERHILL AVENUE NORTH KINGSTOWN, RI 02852 USA
TREASURER	NANCY THORPE	377 SWITCH ROAD WOOD RIVER JUNCTION, RI 02894 USA
SECRETARY	DENA JANSON	140 MYRTLE AVE WARWICK, RI 02886 USA
VICE PRESIDENT	LYNN EPSTEIN	441 POPPASQUASH RD BRISTOL, RI 02809 USA
AOS LIAISON	JEFF BOOKBINDER	39 LANDMARK RD WARICK, RI 02886 USA
DIRECTOR	KATHY DUNSTAN	39 NESTA DRIVE NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	SUSANNA PARSONS	82 ELITE DR CRANSTON, RI 02921 USA
DIRECTOR	SUE GLASS	70 CHARLES ST NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	CHRISTINA HARSH	20 WESTWOOD RD JAMESTOWN, RI 02835 USA
DIRECTOR	CLAIRE HEATON	22 SANDY BROOK RD NORTH SCITUATE, RI 02857 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**

GILL E. THORPE 377 SWITCH ROAD WOOD RIVER JUNCTION , RI 02894

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

Signed this 28 Day of June, 2020 at 3:11:30 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 NANCY THORPE
Signature of Authorized Person

Form No. 631
Revised 09/07