



**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.** 000046221

**2. Name of Corporation** SALT PONDS COALITION, 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   
813312

**4. Corporate Address in Rhode Island**

No. and Street: M. MUGGE  
89 NOYES NECK ROAD  
City or Town: WESTERLY State: RI Zip: 02891 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**

EDUCATION OF THE GENERAL PUBLIC ON ISSUES CONCERNING THE ENVIRONMENT OF COASTAL SALT PONDS IN RHODE ISLAND

**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**Incorporator is no longer applicable; please delete**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	ARTHUR GANZ	281 BEACH ROAD CHARLESTOWN, RI 02813 USA
TREASURER	MARSHALL MUGGE	89 NOYES NECK RD WESTERLY, RI 02891 USA
SECRETARY	PETER MOEHRKE	110 E. INDIGO POINT ROAD SO. KINGSTON, RI 02879 USA
VICE PRESIDENT	RICHARD SARTOR	25 WELLS LANE CHARLESTOWN, RI 02813 USA
DIRECTOR	RICK BLACK	51 FLINTSTONE ROAD NARRAGANSETT, RI 02882 USA
DIRECTOR	SUSAN CARR-SPARKMAN	20 ETHEL ACRES LISBON, CT 06351 USA
DIRECTOR	LAWRENCE DUNN	4750 OLD POST ROAD CHARLESTOWN, RI 02813 USA
DIRECTOR	JOHN CRANDALL	5790A POST ROAD CHARLESTOWN, RI 02813 USA
DIRECTOR	BARBARA ENGEL	6 PASSPATAUG AVENUE WESTERLY, RI 02891 USA
DIRECTOR	WILLIAM LESTER	36 WILLIAMS AVE WESTERLY, RI 02891 USA
DIRECTOR	LEO MAINELLI	151 SUNSET DRIVE CHARLESTOWN, RI 02813 USA
DIRECTOR	ANN MANION	87 BAYBERRY AVE SO. KINGSTOWN, RI 02879 USA
DIRECTOR	CHRIS RANDALL	76A WEEKAPAUG RD WESTERLY, RI 02891 USA
DIRECTOR	TED SEE	116 SHIRLEY DRIVE CHARLESTOWN, RI 02813 USA
DIRECTOR	ANN WHALEY-TOBIN	438 ATLANTIC AVE WESTERLY, RI 02891 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**

MARSHALL MUGGE 89 NOYES NECK ROAD WESTERLY , RI 02891

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

**Signed this 29 Day of June, 2020 at 1:25:49 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 MARSHALL MUGGE, TREASURER

Signature of Authorized Person

Form No. 631  
Revised 09/07

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