



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. 000308758

2. Name of Corporation Herreshoff Marine Museum Condominium Association, 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

813910

4. Corporate Address in Rhode Island

No. and Street: 1 BURNSIDE STREET

City or Town: BRISTOL

State: RI

Zip: 02809

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 GOVERN AND MANAGE THE OWNERSHIP, OPERATION AND MANAGEMENT OF THE PROPERTY KNOWN AS HERRESHOFF MARINE MUSEUM CONDOMINIUM LOCATED IN BRISTOL, RHODE ISLAND AND RELATED 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**Incorporator is no longer applicable; please delete**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**

| Title     | Individual Name<br>First, Middle, Last, Suffix | Address<br>Address, City or Town, State, Zip Code, Country |
|-----------|------------------------------------------------|------------------------------------------------------------|
| PRESIDENT | WILLIAM H LYNN MR                              | 67 HARBOR AVENUE<br>MARBLEHEAD, MA 01945 USA               |
| SECRETARY | SIMON MULLALY                                  | 425 BELLEVUE AVE<br>NEWPORT, RI 02840 USA                  |
| DIRECTOR  | DAVID FORD                                     | 11 BURTON STREET<br>BRISTOL, RI 02809 USA                  |
| DIRECTOR  | MICHAEL HUDNER                                 | 301 WEST MAIN RD<br>LITTLE COMPTON, RI 02837 USA           |
| DIRECTOR  | LAWRENCE D. LAVERS                             | 62 BURTON ST.<br>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**

MOSES AFONSO RYAN LTD. 160 WESTMINSTER STREET, SUITE 400 PROVIDENCE , RI 02903

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

**Signed this 30 Day of June, 2020 at 12:36:07 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 SIMON MULLALY  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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