	State of Rhode Island and Pr
	State of Rhode Island and Propertment of State

ovidence Plantations - Business Services Division

FILED

JUN 2 9 2020

Annual Report for the year:	2020
Non-Profit Corporation	 _
→ Filing period: June 1 - June 30	

→ Filing Fee: \$20.00
→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

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1. Entity ID Number	2. Exact name	2. Exact name of the Corporation						
000027040	Jamestown Garden Club							
3. State of Incorporation		5. Brief description of the character of business conducted in Rhode Island						
RI		To promote knowledge and love of gardening, encourage cultivation of gardening plus public and community projects as well as education and to protect the natural beauties of Conanicut Island						
4. NAICS Code	community projects as well as education and to protect the natural beauties of contained island							
813410								
6. Principal Office Address			City	State	Zip			
PO Box 178			Jamestown	RI	02835			
	7. List ALL officers (names and addresses) Check the box to indicate an attachment							
President Name Elizabeth (Betsy) Moody			Vice-President Name Emily Boenn	Vice-President Name Emily Boenning				
Street Address 9 Conanicus Avenue			Street Address 38 Marine Avenue					
^{City} Jamestown	State RI	^{Zip} 02835	City Jamestown	State RI	^{Zip} 02835			
Secretary Name Dona Gibbs			Treasurer Name Beatrice (Polly) Hutcheson					
Street Address 60 Intrepid Lane			Street Address 75 Bay View Drive					
^{City} Jamestown	State RI	^{Zip} 02835	^{City} Jamestown	State Ri	^{Zip} 02835			
8. List ALL directors (names and ac	idresses). RI Coi	morations MUST li		ack the box to indicate	e an attachment			
Director Name Candace Powell			Director Name Jane Bentley					
Street Address 38 Mt. Hope Aven	ue		Street Address 70 Mt. Hope Avenue					
^{Crty} Jamestown	State RI	^{Zip} 02835	City Jamestown	State RI	^{Zip} 02835			
Director Name Mary Gregory			Director Name Mary Hutchinson					
Street Address 1 Meadow Lane			Street Address 21 Hamilton Avenue					
City Jamestown	State RI	^{Zip} 02835	City Jamestown	State RI	^{Zip} 02835			
			d in the Department of State. Changes red					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.								
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.								
Name of Officer/Authorized Repres		Date						
Elizabeth Moody				06-26-	2020			
Signature of Officer/Authorized Representative Hally S. Novy								

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov