State of Rhode Island
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. 001690252

2. Name of Corporation NAMI Block Island, 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

813319

4. Principal Office Address

No. and Street: 660 CORN NECK ROAD
City or Town: BLOCK ISLAND State: RI Zip: 02807 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

TO BRING MENTAL HEALTH SERVICES TO BLOCK ISLAND RI TO EDUCATE THE PUBLIC ABOUT MENTAL ILLNESS IN ORDER TO REDUCE STIGMA TO PROVIDE SUPPORT FOR FAMILIES OF PERSONS WITH MENTAL ILLNESS

6. Names and Addresses of the Officers and Directors:

All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island

Corporation shall not be less than 3.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
DIRECTOR	JAMES HINTHORN	660 CORN NECK ROAD BLOCK ISLAND, RI 02807 USA
DIRECTOR	PATRICK TENGWALL	PO BOX 1737 BLOCK ISLAND, RI 02807 USA
DIRECTOR	SOCHA COHEN	PO BOX 1102 BLOCK ISLAND, RI 02807 USA

7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

JAMES HINTHORN 660 CORN NECK ROAD BLOCK ISLAND , RI 02807

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

Signed this 3 Day of March, 2021 at 8:57:36 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 JAMES L. HINTHORN
Signature of Authorized Person

Form No. 631
Revised 09/07

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