

State of Rhode Island

Department of State - Business Services Division

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.

MAR 05 2021

B: 7033

1. Entity ID Number 001672844		2. Exact name of the Corporation THE HARRIS FARM CEMETERY FOUNDATION			
3. State of Incorporation R.I.		5. Brief description of the character of business conducted in Rhode Island FUND SET UP FOR FUTURE BEQUEST OF MONIES TO MAINTAIN HISTORICAL CEMETERY			
4. NAICS Code 812220					
6. Principal Office Address 145 HARRIS RD			City SMITHFIELD	State RI	Zip 02917
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input checked="" type="checkbox"/>					
President Name KIRK HARRIS			Vice-President Name NONE		
Street Address 145 HARRIS RD			Street Address		
City SMITHFIELD	State RI	Zip 02917	City	State	Zip
Secretary Name NONE			Treasurer Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name APRIL HARRIS			Director Name MELISSA LINDSEY		
Street Address 144 HARRIS RD			Street Address 152 HARRIS RD		
City SMITHFIELD	State RI	Zip 02917	City SMITHFIELD	State RI	Zip 02917
Director Name WADE GAMBLE			Director Name		
Street Address 139 HARRIS RD			Street Address		
City SMITHFIELD	State RI	Zip 02917	City	State	Zip
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
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 Representative KIRK HARRIS					Date 2/28/2021
Signature of Officer/Authorized Representative <i>Kirk Harris</i>					