



**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: 2021

1. Corporate ID No. 001686412

2. Name of Corporation Sogkonate Garden Club

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

4. Principal Office Address

No. and Street: P O BOX 141
City or Town: LITTLE COMPTON State: RI Zip: 02837 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 13 WILD CHERRY DRIVE
City or Town: LITTLE COMPTON State: RI Zip: 02837 Country: UNI

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

ACQUIRE BROADER KNOWLEDGE OF GARDENING TECHNIQUES; EDUCATE SCHOOL CHILDREN AND ADULTS ABOUT GARDENING TECHNIQUES; PROTECT AND PRESERVE NATURAL RESOURCES, BIRDS AND WILDLIFE; ENCOURAGE PUBLIC PLANTING OF FLOWERS, SHRUBS AND TREES FOR LITTLE COMPTON'S BEAUTIFICATION; SUPPORT THE AIMS OF THE NATIONAL GARDEN CLUBS, INC. AND RHODE ISLAND FEDERATION OF GARDEN CLUBS, INC.

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
PRESIDENT	ANN BEARDSLEY MRS.	11 SHAW ROAD LITTLE COMPTON, RI 02837 US
TREASURER	KATIE J KANE MS	13 WILD CHERRY DRIVE LITTLE COMPTON, RI 02837 USA
SECRETARY	SUE TALBOT MRS	11 TAMBOURNE LANE LITTLE COMPTON, RI 02837 USA
VICE PRESIDENT	EILEEN MOSER MRS	39 BULLOCKS POINT AVE UNIT 3C RIVERSIDE, RI 02915 USA
VICE PRESIDENT	DONNA PILKINGTON	86 LORRAINE AVE PROVIDENCE, RI 02906 USA
DIRECTOR	SHIRLEY HARDISON MS	388 LONG HIGHWAY LITTLE COMPTON, RI 02906 USA
DIRECTOR	CAROLYN MONTGOMERY MRS	284 WEST MAIN RD LITTLE COMPTON, RI 02837 USA
DIRECTOR	MARY MARRA MRS	28 GRANGE AVE LITTLE COMPTON, RI 02837 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

SHIRLEY HARDISON 388 LONG HIGHWAY LITTLE COMPTON , RI 02837

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

Signed this 20 Day of April, 2021 at 9:55:40 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 KATHLEEN J KANE
Signature of Authorized Person

Form No. 631
Revised 09/07