



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. 000027823

2. Name of Corporation The General Nathanael Greene Homestead Association

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



712110

4. Principal Office Address

No. and Street: 50 TAFT STREET

City or Town: COVENTRY

State: RI

Zip: 02816

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

HISTORICAL MUSEUM

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	DAVID M. PROCACCINI	151 LEXINGTON AVE CRANSTON, RI 02910 USA
TREASURER	CATHERINE G PROCACCINI	575 DAVIDVILLE RD NORTH KINGSTOWN, RI 02852 USA
SECRETARY	ALETTA CROFT	30 MONROE DRIVE COVENTRY, RI 02816 USA
VICE PRESIDENT	ALAN CARPENTER	16 PINE AVE COVENTRY, RI 02816 USA
VICE PRESIDENT	WAYLAN K SHROPSHIRE	678 NW ASHFORD LOOP BREMERTON , WA 98311 USA
DIRECTOR	PERRY CLOUGH	125 WESTFIELD DRIVE EAST GREENWICH, RI 02818 USA
DIRECTOR	JOSHUA WOJNAR	112 DANIELSON PIKE BNORTH SCITUATE, RI 02857 RI
DIRECTOR	BRIAN ZINSZER	872 SHERMAN FARM RD HARRISVILLE, RI 02830 USA
DIRECTOR	DR. DANIEL HARROP	PO BOX 603364 PROVIDENCE, RI 02906 USA
DIRECTOR	RICHARD HOWELL	47 GLENN DRIVE WILBRAHAM, MA 01095 USA
DIRECTOR	RICHARD SIEMBAB	80 BEACH RD BRISTOL , RI 02809 USA
DIRECTOR	RICK LINCOLN	69 HIGH ST CARVER, MA 02330 USA
DIRECTOR	THOMAS E. GREENE	PO BOX 113822 NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	DR. CHRISTOPHER S. BLACK	340 WAKEFIELD ST. WEST WARWICK, RI 02893 USA
DIRECTOR	LYNN MEDEIROS	2 KING PHILLIP RD COVENTRY, RI 02816 USA
DIRECTOR	JENNIFER DAYE	50 OLIVER ST NORTH PROVIDENCE, RI 02904 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

DAVID M. PROCACCINI 151 LEXINGTON AVE CRANSTON , RI 02910

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

Signed this 13 Day of May, 2021 at 2:22:43 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 DAVID M. PROCACCINI
Signature of Authorized Person

Form No. 631
Revised 09/07

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