



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

Annual Report for the year:

Non-Profit Corporation

2021

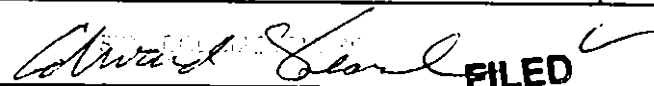
→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

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

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R.I. DEPT. OF STATE  
BUS SVCS DIV

2021 JUN -1 P 3 00

1. Entity ID Number 000796215		2. Exact name of the Corporation The Nautilus Funds			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island Provide small grants to local 501(C3) organizations from a family non profit charity			
4. NAICS Code 813219					
6. Principal Office Address 88 Homewood Avenue			City North Providence	State RI	Zip 02911
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name Edward C. Pearl			Vice-President Name William J. Pearl		
Street Address 88 Homewood Avenue			Street Address 217 Star Lane		
City North Providence	State RI	Zip 02911	City Glen Carbon	State Illinois	Zip 62034
Secretary Name Jeanne A. Pearl-Macklem			Treasurer Name Joseph P. Pearl		
Street Address 7616 North Sherman Boulevard			Street Address 10 Pleasant View Drive		
City Brown Deer	State WI	Zip 53209	City North Providence	State RI	Zip 02904
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name Edward C. Pearl			Director Name William J. Pearl		
Street Address 88 Homewood Avenue			Street Address 217 Star Lane		
City North Providence	State RI	Zip 02911	City Glen Carbon	State Illinois	Zip 62034
Director Name Jeanne A. Pearl-Macklem			Director Name Joseph P. Pearl		
Street Address 7616 North Sherman Boulevard			Street Address 10 Pleasant View Drive		
City Brown Deer	State WI	Zip 53209	City North Providence	State RI	Zip 02904
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>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.</b>					
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 Edward C. Pearl				Date June 7, 2021	
Signature of Officer/Authorized Representative 					

MAIL TO:  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: www.sos.ri.gov

JUN 07 2021  
BY *CA AMZ.85*