



**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.** 000144237

**2. Name of Corporation** Alliance for a Livable Newport

**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: PO BOX 2636  
City or Town: NEWPORT State: RI Zip: 02840 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 IMPROVE THE QUALITY OF LIFE IN NEWPORT'S RESIDENTIAL NEIGHBORHOODS

**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.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	ISABEL GRIFFITH	22 WALNUT ST NEWPORT, RI 02840 USA
TREASURER	RON BECKER	189 RHODE ISLAND AVE NEWPORT, RI 02840 USA
SECRETARY	JOHN HIRSCHBOECK	410 GIBBS AVE. NEWPORT, RI 02840 USA
VICE PRESIDENT	ROGER WELLS	229 GIBBS AVE. NEWPORT, RI 02840 USA
DIRECTOR	CHIP LEAKAS	40 DEXTER ST NEWPORT, RI 02840 USA
DIRECTOR	TOM HOCKADAY	67 BRIDGE ST. NEWPORT, RI 02840 USA
DIRECTOR	ANN MCMAHON	7 GUERNEY CT. NEWPORT, RI 02840 US

**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**

ISABEL GRIFFITH 22 WALNUT STREET NEWPORT , RI 02840

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

**Signed this 9 Day of June, 2021 at 2:53:56 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 RONALD BECKER  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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