



**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.** 000030163

**2. Name of Corporation** THE TOMAQUAG INDIAN MEMORIAL MUSEUM

**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: 390 A SUMMIT ROAD  
City or Town: EXETER State: RI Zip: 02822 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 PROMOTE UNDERSTANDING OF THE NATIVE AMERICAN INDIAN, TO MAINTAIN A MUSEUM, TO OPERATE A SCHOOL FACILITY NAMED THE NUWEETOOUN SCHOOL

**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	ELISABETH DOVE MANNING	120 NORTH BURNHAM HIGHWAY LISBON, CT 06351 USA
PRESIDENT	KATHARINE KIRAKOSIAN	523 HAZARD RD. WEST GREENWICH, RI 02857 USA
TREASURER	LAWRENCE SHUMATE	5 SHORE DRIVE NARRAGANSETT, RI 02882 USA
SECRETARY	ALEXANDREA FORTIN	17 FAIRVIEW DRIVE PAWCATUCK, CT 06379 USA
RECORDING SECRETARY	AMANDA THOMPSON	23 RINGGOLD ST PROVIDENCE, RI 02903 USA
DIRECTOR	VALERIE TAYLOR	245 COLE AVE PROVIDENCE, RI 02906 USA
DIRECTOR	ROBERT SHUMATE	122 POND ST WAKEFIELD, RI 02879 USA
DIRECTOR	ANGEL BETH SMITH	5 CROCKER HILL RD LEDYARD, CT 06339 USA
DIRECTOR	CLINTON GARDINER	232 SOUTH MAIN STREET WEST HARTFORD, CT 06107 USA
DIRECTOR	AMY PICKWORTH	1064 4TH STREET PROVIDENCE, RI 02906 USA
DIRECTOR	EMILY MANNING	20 ICE HOUSE ROAD LISBON, CT 06351 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**

APULLA DOVE JENNINGS 390 SUMMIT ROAD EXETER , RI 02822

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

**Signed this 18 Day of June, 2021 at 9:17:34 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 LOREN M. SPEARS  
Signature of Authorized Person

Form No. 631  
Revised 09/07