



**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.** 000029147

**2. Name of Corporation** Rhode Island Arts Foundation at Newport, Incorporated

**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: 42 DEARBORN STREET

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**

ANNUAL CLASSICAL MUSIC FESTIVAL HELD IN THE TURN OF THE CENTURY  
MANSIONS OF NEWPORT DURING 16 DAYS IN JULY CORPORATION ORGANIZED  
EXCLUSIVELY FOR CHARITABLE RELIGIOUS EDUCATIONAL AND SCIENTIFIC  
PURPOSES WITHIN THE MEANING OF SECTION 501C3 OF INTERNAL REVENUE CODE

**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	SUZANNA LARAMEE	111 HARRISON AVE NEWPORT, RI 02840 USA
TREASURER	MICHAEL CONOVER	18 MOUNT VERNON STREET NEWPORT, RI 02840 USA
SECRETARY	LESLIE HOGAN	128 PROSPECT HILL STREET NEWPORT, RI 02840 USA
VICE PRESIDENT	STEPHEN HUTTLER	17 ELIZABETH LANE MIDDLETOWN, RI 02842 USA
DIRECTOR	JOHN WINKLEMAN	355 BLACKSTONE BLVD. APT 453 PROVIDENCE, RI 02906 USA
DIRECTOR	MELANIE NIEMIEC	1 EAST END AVENUE NEW YORK, NY 10075 USA
DIRECTOR	MARILYN WOLOHOJIAN	356 GOLFVIEW RD NORTH PALM BEACH, FL 33408 USA
DIRECTOR	PATRICIA PETERSON	6 AVENIR COURT BRISTOL, RI 02809 USA
DIRECTOR	CRAIG SHAPERO	1816 EDGEHILL DRIVE ALEXANDRIA, VA 22307 USA
DIRECTOR	ALYS KRICHAVSKY	111 HARRISON AVENUE B7 NEWPORT, RI 02840 USA
DIRECTOR	STEPHEN JOHNSON	44 WAPPING STREET PORTSMOUTH, RI 02871 USA
DIRECTOR	DIANA L PEARSON	40 DIVISION STREET NEWPORT, RI 02840 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**

JOYCE L'HEUREUX 26 VALLEY ROAD, #103 MIDDLETOWN , RI 02842

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

**Signed this 29 Day of June, 2021 at 5:10:38 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 JOYCE LHEUREUX  
Signature of Authorized Person

