



State of Rhode Island
Department of State - Business Services Division

F 10
 JUN 28 2021
 BY IOS

Annual Report for the year: 2021

Non-Profit Corporation

- Filing period: June 1 - July 30
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number 108866		2. Exact name of the Corporation The Block Island Maritime Funding, Inc.					
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island Fundraising activities promoting the education for children in marine sciences					
4. NAICS Code 813219 - Other Grantmaking <input type="checkbox"/>							
6. Principal Office Address P.O. 95				City Newport		State RI	Zip 02840
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>							
President Name Richard T. Harris				Vice-President Name Elizabeth Harris			
Street Address P.O. Box 95				Street Address P.O. Box 95			
City Newport		State RI	Zip 02840		City Newport		Zip 02840
Secretary Name Linda Watts				Treasurer Name N/A			
Street Address P.O. Box 95				Street Address			
City Newport		State RI	Zip 02840		City		Zip
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>							
Director Name Richard T. Harris				Director Name Elizabeth Harris			
Street Address P.O. Box 95				Street Address P.O. Box 95			
City Newport		State RI	Zip 02840		City Newport		Zip 02840
Director Name Linda Watts				Director Name			
Street Address P.O. Box 95				Street Address			
City Newport		State RI	Zip 02840		City		Zip
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.							
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.							
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>							
Name of Officer/Authorized Representative Richard T. Harris						Date 6/25/2021	
Signature of Officer/Authorized Representative <i>Richard T. Harris</i>							