



**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. 000029179

2. Name of Corporation Society of Mayflower Descendants in the State of Rhode Island Providence Plantations

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: 191 MEADOW TREE FARM ROAD

City or Town: SAUNDERSTOWN

State: RI Zip: 02874 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

ENACTED THROUGH THE GENERAL ASSEMBLY DURING THE JANUARY SESSION OF 1916. EDUCATIONAL AND HISTORICAL

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.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
DIRECTOR	WILLIAM P ULMSCHNEIDER	P.O. BOX 147 WAKEFIELD, RI 02880 USA
DIRECTOR & GOVERNOR	NANCY E WILDES	P.O. BOX 147 WAKEFIELD, RI 02880 USA
DEPUTY GOVERNOR	JEFFREY K. HARRINGTON	P.O. BOX 147 WAKEFIELD, RI 02880 USA
TREASURER	PAMELA DEPAUL	P.O. BOX 147 WAKEFIELD, RI 02880 USA
ELDER	WILLIAM W. TAYLOR JR.	P.O. BOX 147 WAKEFIELD, RI 02880 USA
CAPTAIN	TIMOTHY ULMSCHNEIDER	P.O. BOX 147 WAKEFIELD, RI 02880 USA
CORRESPONDING SECRETARY	RONALD BARNES	P.O. BOX 147 WAKEFIELD, RI 02886 USA
RECORDING SECRETARY	LEIGH CARNEY	P.O. BOX 147 WAKEFIELD, RI 02886 USA
CO-HISTORIAN	DARLENE GARDNER	P.O. BOX 147 WAKEFIELD, RI 02880 USA
CO-HISTORIAN	LYNN A. MCLAUGHLIN	P.O. BOX 147 WAKEFIELD, RI 02886 USA
CO-HISTORIAN	LOIS SORENSEN	P.O. BOX 147 WAKEFIELD, RI 02880 USA
SURGEON	LOUISE SHOVELTON	P. O. BOX 147 WAKEFIELD, RI 02886 USA
DIRECTOR	ALLISON H. MORRISON	P.O. BOX 147 WAKEFIELD, RI 02880 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

ALLISON H. MORRISON 384 WEST ALLENTON ROAD NORTH KINGSTOWN , RI 02852

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

Signed this 30 Day of June, 2021 at 12:58:47 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 NANCY E. WILDES
Signature of Authorized Person

