



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. 000027310

2. Name of Corporation THE JUNIPER HILL CEMETERY

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: 24 SHERRY AVENUE

P.O. BOX 551

City or Town: BRISTOL

State: RI

Zip: 02809

Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 2 WINDWARD DRIVE

City or Town: BARRINGTON

State: RI

Zip: 02806

Country: USA

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

CEMETERY

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
TREASURER	PETER ALARIE	2 WINDWARD DRIVE BARRINGTON, RI 02806 USA
PRESIDENT	HALSEY C HERRESHOFF	125 HOPE STREET BRISTOL, RI 02809 USA
OTHER OFFICER	PETER ALARIE	2 WINDWARD DRIVE BARRINGTON, RI 02806
DIRECTOR	JOHN T HOWE	8 CARRIAGE LN BRISTOL, RI 02809 USA
DIRECTOR	LIANNE PINHEIRO	30 WOODLAWN AVE. BRISTOL, RI 02809 USA
DIRECTOR	RALPH M. KINDER	155 S MAIN ST PROVIDENCE, RI 02903 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

PETER A. ALARIE 2 WINDWARD DRIVE BARRINGTON , RI 02806

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

Signed this 5 Day of July, 2021 at 10:44:41 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 PETER ALARIE
Signature of Authorized Person

Form No. 631
Revised 09/07

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