



State of Rhode Island

Department of State - Business Services Division

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R.I. DEPT. OF STATE
BUS SVCS DIV2021 NOV -1 P 3:07
STAMPAnnual Report for the year: **2020**

Non-Profit Corporation

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number 000029956		2. Exact name of the Corporation Plum Beach Club			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island Summer Beach and Tennis Club			
4. NAICS Code 813990 - Other Similar Organi		To Answer questions below more specifically: 1. 6-50 full time employees, but only during summer. 2. members volunteer for projects. 3. funding is from annual dues and lesson fees.			
6. Principal Office Address 224 Plum Beach Rd			City Saunderstown	State RI	Zip 02874
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Ted Kresse			Vice-President Name Kaela O'Neil		
Street Address 60 Big Oak Dr			Street Address 141 Prospect St		
City North Kingstown	State RI	Zip 02852	City North Kingstown	State RI	Zip 02852
Secretary Name Margaret Kinnecom			Treasurer Name Jeffrey Wadovick		
Street Address 98 Hillside St			Street Address 76 Mesa Dr		
City Saunderstown	State RI	Zip 02874	City North Kingstown	State RI	Zip 02852
8. List ALL directors (names and addresses) RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment ☒					
Director Name Kaitlin Wilson			Director Name Michael Denci		
Street Address 7 Stone Gate Drive			Street Address 20 Wilbur Hazard Rd		
City North Kingstown	State RI	Zip 02852	City Saunderstown	State RI	Zip 02874
Director Name John Clarke			Director Name John Walsh III		
Street Address 51 Rose Hill Rd			Street Address 90 Spring Street		
City Saunderstown	State RI	Zip 02874	City Saunderstown	State RI	Zip 02874
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 David W. Ashley. (treasurer as of 9/5/21)				Date 10/21/2021	
Signature of Officer/Authorized Representative 				FILED	

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

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FORM 631 - Revised: 08/2020

Addendum to Plum Beach Club 2020 Board of Directors (Additional Directors):

Christine Monaco

91 Misty Meadow Lane

North Kingstown, RI 02852

David Gagnon

139 Exeter Rd

North Kingstown, RI 02852

Pam Boylan Ong

101 Tefft St

Saunderstown, RI 02874