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State of Rhode Island

Department of State - Business Services Division

| Annual Report for the year: | | | | | | |
|-----------------------------|--|--|--|--|--|--|
| Non-Profit Corporation | | | | | | |

2021

-> Filing period: June 1 - June 30

→ Filing Fee: \$20.00

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

| FILED |
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| BY |
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| | | | | x | | | |
|--|---------------------------------|--|---------------------------------|----------|----------------------|--|--|
| 1. Entity ID Number | 2. Exact nam | 2. Exact name of the Corporation | | | | | |
| 004313 | Block Island Maritime Institute | | | | | | |
| 3. State of Incorporation | 5. Brief descr | Brief description of the character of business conducted in Rhode Island | | | | | |
| RI | | provide and foster educational programs and maritime activities including marine science and | | | | | |
| 4-NAICS Code | maritime he | maritime heritage for residents and visitors on Block Island. | | | | | |
| x13212 | | | | | | | |
| 6. Principal Office Address | ffice Address | | | State | Zip | | |
| POB 358 | | | Block Island | RI | 02807 | | |
| 7. List ALL officers (names and addresses) Check the box to indicate an attachment | | | | | | | |
| President Name Douglas Macdougall | | | Vice-President Name John Lehman | | | | |
| Street Address | | | Street Address Pob 164 | | | | |
| City Block Island | State RI | ^{Zip} 02807 | City Block Island | State RI | ^{Zip} 02807 | | |
| Secretary Name Henry Hill | | | Treasurer Name Susan Weissman | | | | |
| Street Address POB 1673 | | | Street Address POB 97 | | | | |
| City Block Island | State RI | Zip 02807 | City Block Island | State RI | ^{Zip} 02807 | | |
| 8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment | | | | | | | |
| Director Name | | | Director Name | | | | |
| Street Address | | | Street Address | | | | |
| City | State | Zip | City | State | Zıp | | |
| Director Name | | | Director Name | | | | |
| Street Address | | | Street Address | | | | |
| City | State | Zip | City | State | 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. | | | | | | | |
| This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee. | | | | | | | |
| Name of Officer/Authorized Representative | | | | Date | 1 | | |
| Swan Weisman | | | | 12/5 | /21 | | |
| Signature of Officer/Authorized Representative | | | | | | | |
| | <u>Verreix</u> | | · | | | | |

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov

ATTACHMENT TO 2019 ANNUAL REPORT

Block Island Maritime Institute a Non-Profit Corporation

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BY PO

8. Additional names and addresses of its directors:

Directors: all addresses on Block Island, RI 02807

Anthony Pappas PO Box 1454 Darren Gill High St Susan Averna Center Rd PO Box 247 George Davis Megan McClellan Coast Guard Rd Pamela Gelsomini PO box 118 Nancy Ruddle PO Box 1274 Craig Fontaine Ocean Ave Maura Cousins PO Box 275 Bruce Johnson PO Box 136 Mike Brownell PO Box 1654 Dan McLaughlin PO Box 521

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