



**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: February 1 - May 1*

*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:** 2022

**1. Corporate ID No.** 000036532

**2. Name of Corporation** Friends of The Glen Manor House

**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: 3 FRANK COELHO DRIVE

P.O. BOX 502

City or Town: PORTSMOUTH

State: RI

Zip: 02871

Country: USA

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

PROMOTING THE HISTORIC PRESERVATION AND RESTORATION OF THE GLEN MANOR, INCLUDING FUNDRAISING FOR SUCH PURPOSE

**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             | Address                                         |
|-----------|-----------------------------|-------------------------------------------------|
|           | First, Middle, Last, Suffix | Address, City or Town, State, Zip Code, Country |
| PRESIDENT | BRENDA DORAN                | 78 CHURCH LN                                    |

|           |               |                                               |
|-----------|---------------|-----------------------------------------------|
|           |               | PORTSMOUTH, RI 02871 USA                      |
| TREASURER | BARBARA CHASE | 31 MACOMBER<br>PORTSMOUTH, RI 02871 USA       |
| SECRETARY | KAREN MENEZES | 271 FERRY LANDING<br>PORTSMOUTH, RI 02871 USA |
| DIRECTOR  | COLEEN RAPOSA | 51 PEGGY LANE<br>PORTSMOUTH, RI 02871 USA     |
| DIRECTOR  | BRENDA DORAN  | 78 CHURCH<br>PORTSMOUTH, RI 02871 USA         |
| DIRECTOR  | BARBARA CHASE | 31 MACOMBER LN<br>PORTSMOUTH , RI 02871 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**

BARBARA CHASE 3 FRANK COELHO DRIVE PORTSMOUTH , RI 02871

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

**Signed this 21 Day of January, 2022 at 2:52:14 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 CATHERINE WILKINSON  
Signature of Authorized Person

Form No. 631  
Revised 09/07

© 2007 - 2022 State of Rhode Island  
All Rights Reserved