



**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. 000159108

2. Name of Corporation Blackstone River Coalition, Inc.

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: 235 PROMENADE STREET, SUITE 560
P.O. BOX 28

City or Town: PROVIDENCE State: RI Zip: 02908 Country: USA

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

TO RESTORE AND PROTECT WATER QUALITY AND WILDLIFE HABITAT IN THE RIVER CORRIDOR AND TO ADVOCATE FOR SOUND LAND USE IN THE BLACKSTONE RIVER WATERSHED.

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
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PRESIDENT	DONNA WILLIAMS	50 NORTH STREET GRAFTON, MA 01519 USA
TREASURER	ALICE CLEMENTE	P.O.BOX 8068 CUMBERLAND, RI 02864 USA
SECRETARY	PETER COFFIN	3 OLD SAWMILL RD. MENDON, MA 01756 USA
DIRECTOR	DONNA WILLIAMS	50 NORTH STREET GRAFTON, MA 01519 USA
DIRECTOR	ALICE CLEMENTE	P.O.BOX 8068 CUMBERLAND, RI 02864 USA
DIRECTOR	KEITH HAINLEY	50 SIDNEY AVE WOONSOCKET, RI 02895 USA
DIRECTOR	PETER COFFIN	3 OLD SAWMILL RD MENDON, MA 01756 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**

KEITH HAINLEY 50 SIDNEY STREET WOONSOCKET , RI 02895

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 July, 2022 at 10:55:23 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 G. COFFIN
Signature of Authorized Person

Form No. 631
Revised 09/07