| | State of Rhode Office of the Secreta | | Fee: \$20.00 |
|---|---|--|---|
| | Division Of Busines | s Services | |
| | 148 W. River S | | |
| | Providence RI 029 | | |
| 1630 | (401) 222-30 | 40 | |
| Non-Profit Corporation | | | |
| Annual Report Filing Period: February 1 - May | 1 | | |
| In accordance with R.I.G.L. 7-6 annual report within the time pr penalty fee of \$25.00. | | | |
| ANNUAL REPORT YEAR: 202 | <u>3</u> | | |
| 1. Corporate ID No. 00011 | <u>8174</u> | | |
| 2. Name of Corporation <u>The s</u> | Steere House Foundation | | |
| 3. State of Incorporation | | | |
| State: <u>RI</u> | | | |
| | ARTICLE III | | |
| Using the dropdown labeled N primary type of activity in whic populate a NAICS Code based box on the right. For further as | h your entity engages. The on the chosen selection. If | box to the right of the the NAICS Code is kr | dropdown will |
| NAICS Code | | | |
| <u>813219</u> | | | |
| 4. Principal Office Address | | | |
| No. and Street: 100 BOR | DEN STREET | | |
| City or Town: PROVID | | e: <u>RI</u> Zip: <u>02903</u> | Country: <u>USA</u> |
| 5. Brief Description of the Ch | aracter of the Affairs Condu | ucted in Rhode Island | I |
| TO ENGAGE IN DEVELOF | PMENT ACTIVITIES ANI | O STRATEGIC PLA | NNING |
| 6. Names and Addresses of t | he Officers and Directors: | | |
| All Directors and Officers mu Island Corporation shall not I | | e number of DIRECT | ORS of a Rhode |
| Title | Individual Name First, Middle, Last, Suffix | | ress State, Zip Code, Country |
| <u>,</u> | ,, <u></u> | , | |

| PRESIDENT | LINDA M CANNISTRA, BS, MBA, CCRC | 87 RIDGE ROAD SMITHFIELD, RI 02917 USA |
|----------------|-------------------------------------|---|
| TREASURER | NORMA OWENS | 133 CAMDEN COURT WAKEFIELD, RI 02879 USA |
| SECRETARY | DIANE STEERE NOBLES | 17 EAST POND ROAD NARRAGANSETT, RI 02882 USA |
| DIRECTOR | CAROL MCMAHON | 89 YALE AVENUE WARWICK, RI 02888 USA |
| VICE PRESIDENT | PAUL ASTPHAN | 17 ALMSDALE ATTLEBORO, MA 02703 USA |
| DIRECTOR | CHELSIE HIGGINS | 33 ABBOTT AVE WARWICK, RI 02886 USA |
| DIRECTOR | JOSHUA SEGAL | 62 WEST RIVER PARKWAY NORTH PROVIDENCE, RI 02904 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

JOSHUA SEGAL 100 BORDEN STREET PROVIDENCE , RI 02903

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

Signed this 2 Day of February, 2023 at 12:56:34 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 LINDA CANNISTRA

Signature of Authorized Person

Form No. 631 Revised 09/07

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