



State of Rhode Island

## Department of State - Business Services Division

Annual Report for the year: 2023 Amended  
Non-Profit Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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RI DEPT. OF STATE  
BUS SERVICES

2023 FEB 27 P 3:0

1. Entity ID Number <u>00061774</u>		2. Exact name of the Corporation <u>Natherw Narragansett Indian Tribe of Rhode Island</u>	
3. State of Incorporation <u>RI</u>		5. Brief description of the character of business conducted in Rhode Island <u>nonprofit organization</u> <u>insure the recognition of its Tribal members</u>	
4. NAICS Code <u>921130</u>			
6. Principal Office Address <u>106 miner ST.</u>		City <u>providence</u>	State <u>RI</u>
		Zip <u>02905</u>	
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <u>OTIS BLISS</u>		Vice-President Name <u>Frances Ramos</u>	
Street Address <u>106 miner ST.</u>		Street Address <u>125 Hobson Ave</u>	
City <u>prov.</u>	State <u>RI</u>	City <u>E. Providence</u>	State <u>RI</u>
Zip <u>02905</u>		Zip <u>02914</u>	
Secretary Name <u>Vivian Waite</u>		Treasurer Name <u>JOY Robinson</u>	
Street Address <u>81 West Warwick Ave</u>		Street Address <u>213 OXFORD ST.</u>	
City <u>West Warwick</u>	State <u>RI</u>	City <u>Prov</u>	State <u>RI</u>
Zip <u>02893</u>		Zip <u>02915</u>	
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input checked="" type="checkbox"/></span>			
Director Name <u>Frances Ramos</u>		Director Name <u>JOY Robinson</u>	
Street Address <u>125 Hobson Ave</u>		Street Address <u>213 OXFORD ST.</u>	
City <u>E. Prov</u>	State <u>RI</u>	City <u>providence</u>	State <u>RI</u>
Zip <u>02914</u>		Zip <u>02915</u>	
Director Name <u>Jennifer M. Lee</u>		Director Name <u>KEVIN BLISS</u>	
Street Address <u>25 Grovernor ST.</u>		Street Address <u>212 OXFORD ST.</u>	
City <u>Plain Field</u>	State <u>MA</u>	City <u>providence</u>	State <u>RI</u>
Zip <u>01026</u>		Zip <u>02905</u>	
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 <u>Frances Ramos</u>		Date <u>2/27/23</u>	
Signature of Officer/Authorized Representative <u>Frances Ramos</u>		FILED <u>301</u> <u>W</u> FEB 27 2023 <u>3:01 pm</u>	

MAIL TO:

Division of Business Services

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Website: www.sos.ri.gov

Director

Diane Gray

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Director

Vivian Waite

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