



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2023
 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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 BUS SVCS DIV

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| | | | |
|--|-----------------|--|---------------------------|
| 1. Entity ID Number 790215 | | 2. Exact name of the Corporation The Nautilus Funds | |
| 3. State of Incorporation Rhode Island | | 5. Brief description of the character of business conducted in Rhode Island Provide small grants to local 501(C3) organizations from a family non profit charity | |
| 4. NAICS Code 813219 - Other Grantmaking | | | |
| 6. Principal Office Address 88 Homewood Avenue | | City North Providence | State RI |
| | | Zip 02911 | |
| 7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/> | | | |
| President Name Edward C. Pearl | | Vice-President Name William J. Pearl | |
| Street Address 88 Homewood Avenue | | Street Address 217 Star Lane | |
| City North Providence | State RI | City Glen Carbon | State Illinois |
| Zip 02911 | | Zip 62034 | |
| Secretary Name Jeanne A. Pearl-Macklem | | Treasurer Name Joseph P. Pearl | |
| Street Address 7616 North Sherman Boulevard | | Street Address 10 Pleasant View Drive | |
| City Brown Deer | State WI | City North Providence | State RI |
| Zip 53209 | | Zip 02904 | |
| 8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/> | | | |
| Director Name Edward C. Pearl | | Director Name William J. Pearl | |
| Street Address 88 Homewood Avenue | | Street Address 217 Star Lane | |
| City North Providence | State RI | City Glen Carbon | State Illinois |
| Zip 02911 | | Zip 62034 | |
| Director Name Jeanne A. Pearl-Macklem | | Director Name Joseph P. Pearl | |
| Street Address 7616 North Sherman Boulevard | | Street Address 10 Pleasant View Drive | |
| City Brown Deer | State WI | City North Providence | State RI |
| Zip 53209 | | Zip 02904 | |
| 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. | | | |
| <i>This report must be signed by either the President, Vice-President, Secretary Assistant Secretary Treasurer, duly Authorized Representative, Receiver or Trustee</i> | | | |
| Name of Officer/Authorized Representative Edward C. Pearl | | | Date 03/03/2023 |
| Signature of Officer/Authorized Representative <i>Edward Pearl</i> | | | |

FILED
MAR 3 2023
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 BY: _____

MAIL TO:
 Division of Business Services
 148 W River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov