RI SOS Filing Number: 202331100660 Date: 3/18/2023 1:54:00 PM



# 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: 2023** 

- 1. Corporate ID No. <u>001710807</u>
- 2. Name of Corporation Erik Brine Friends Of
- 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 <u>click here.</u>

**NAICS** Code

813940

### 4. Principal Office Address

No. and Street: 83 COLUMBIA AVE.

City or Town: JAMESTOWN State: RI Zip: 02835-1344 Country: USA

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

THE PURPOSE OF THIS ORGANIZATION IS TO COLLECT CONTRIBUTIONS AND DISBURSE THE FUNDS NECESSARY FOR THE CAMPAIGN TO ELECT ERIK BRINE.

#### 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
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
DIRECTOR	ERIK GERARD BRINE	83 COLUMBIA AVE JAMESTOWN, RI 02835 USA
DIRECTOR	ANNE LIVINGSTON	100 RACQUET RD JAMESTOWN, RI 02835 USA
DIRECTOR	MELODY DRNACH	10 UNION ST JAMESTOWN, RI 02835 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

ERIK BRINE 83 COLUMBIA AVE JAMESTOWN, RI 02835

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

**Signed this 18 Day of March, 2023 at 1:58:34 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 ERIK G. BRINE

Signature of Authorized Person

Form No. 631 Revised 09/07

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