



**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.** 001718999

**2. Name of Corporation** Bermuda Race Foundation, 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

813211

**4. Principal Office Address**

No. and Street: 1301 ATWOOD AVENUE, SUITE 215N

City or Town: JOHNSTON

State: RI Zip: 02919 Country: USA

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

THE CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE PURPOSES AS PROVIDED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE OF 1986, AS AMENDED (THE CODE), INCLUDING, WITHOUT LIMITATION, TO PROMOTE NATIONAL AND INTETNATIONAL AMATEUR SAILING COMPETITION BY CONDUCTING REGIONAL, NATIONAL AND INTERNATIONAL REGATTAS AND RACES, EDUCATIONAL SEMINARS, TRAINING, CONFERENCES AND MEETINGS REGARDING OFFSHORE RACING AND SAFETY AT SEA, TO PROVIDE SERVICES IN FURTHERANCE OF THE FOREGOING, AND TO SOLICIT, COLLECT AND EXPEND

FUNDS FOR SUCH PURPOSES, AND IS FURTHER AUTHORIZED TO CONDUCT ACTIVITIES IN FURTHERANCE OF ALL OTHER PURPOSES WHICH MAY BE CONDUCTED BY A NOT FOR PROFIT TAX EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) OF THE CODE.

**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.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
DIRECTOR	P. LESLIE CRANE	1301 ATWOOD AVENUE, SUITE 215N JOHNSTON, RI 02919 USA
DIRECTOR	J.W. ROBERT MEDLAND	1301 ATWOOD AVENUE, SUITE 215N JOHNSTON, RI 02919 USA
DIRECTOR	SOMERS W. KEMPE	1301 ATWOOD AVENUE, SUITE 215N JOHNSTON, RI 02919 USA
DIRECTOR	PETER L. CHANDLER	1301 ATWOOD AVENUE, SUITE 215N JOHNSTON, RI 02919 USA
DIRECTOR	CHRISTOPHER L. OTOROWSKI	1301 ATWOOD AVENUE, SUITE 215N JOHNSTON, RI 02919 USA
DIRECTOR	JOHN D. OSMOND MD	1301 ATWOOD AVENUE, SUITE 215N JOHNSTON, RI 02919 USA
DIRECTOR	JOHN S. WINDER	1301 ATWOOD AVENUE, SUITE 215N JOHNSTON, RI 02919 USA
DIRECTOR	W. BRADFORD WILLAUER	1301 ATWOOD AVENUE, SUITE 215N JOHNSTON, RI 02919 USA
DIRECTOR	JAMES G. BINCH	1301 ATWOOD AVENUE, SUITE 215N JOHNSTON, RI 02919 USA
DIRECTOR	JEFFREY L. EBERLE	1301 ATWOOD AVENUE, SUITE 215N JOHNSTON, RI 02919 USA
DIRECTOR	JOHN R. GOWELL	1301 ATWOOD AVENUE, SUITE 215N JOHNSTON, RI 02919 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**

JOHN R. GOWELL PANNONE LOPES DEVEREAUX & O'GARA LLC 1301 ATWOOD AVENUE, SUITE 215N JOHNSTON , RI 02919

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

**Signed this 27 Day of March, 2023 at 3:49:13 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 JOHN R. GOWELL  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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