



State of Rhode Island  
**Department of State - Business Services Division**

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 R.I. DEPT. OF STATE  
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Annual Report for the year: 2023  
 Non-Profit Corporation

2023 APR 10 PM 3:29

- Filing period: February 1 - May 1
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number <b>104709</b>		2. Exact name of the Corporation <b>Addieville East Conservation Club, Inc.</b>			
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island <b>Conservation of open space and support of outdoor activities</b>			
4. NAICS Code <b>813312</b>					
6. Principal Office Address <b>200 Pheasant Drive</b>		City <b>Mapleville</b>	State <b>RI</b>	Zip <b>02839</b>	
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input checked="" type="checkbox"/></span>					
President Name <b>Paula L. Gaebe</b>		Vice-President Name <b>John O'Brien</b>			
Street Address <b>200 Pheasant Drive</b>		Street Address <b>576 Bullard Street</b>			
City <b>Mapleville</b>	State <b>RI</b>	Zip <b>02839</b>	City <b>Holden</b>	State <b>MA</b>	Zip <b>01520</b>
Secretary Name <b>Sally A. Hayter</b>		Treasurer Name <b>Sally A. Hayter</b>			
Street Address <b>200 Pheasant Drive</b>		Street Address <b>200 Pheasant Drive</b>			
City <b>Mapleville</b>	State <b>RI</b>	Zip <b>02839</b>	City <b>Mapleville</b>	State <b>RI</b>	Zip <b>02839</b>
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Paula L. Gaebe</b>		Director Name <b>John O'Brien</b>			
Street Address <b>200 Pheasant Drive</b>		Street Address <b>576 Bullard Street</b>			
City <b>Mapleville</b>	State <b>RI</b>	Zip <b>02839</b>	City <b>Holden</b>	State <b>MA</b>	Zip <b>01520</b>
Director Name <b>Sally A. Hayter</b>		Director Name			
Street Address <b>200 Pheasant Drive</b>		Street Address			
City <b>Mapleville</b>	State <b>RI</b>	Zip <b>02839</b>	City	State	Zip
9. The Registered Agent Information of record with the RI Department of State is accurate. Changes require filing Form 641.					
<i>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>					
<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 <b>Paula L. Gaebe</b>					Date
Signature of Officer/Authorized Representative					<b>FILED</b>

APR 10 2023

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