RI SOS Filing Number: 202341968230 Date: 9/28/2023 1:13:00 PM

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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.			•		
Entity ID Number	2. Exact name of the Corporation				77		
000307630	Jamestown Arts Center						
3. State of Incorporation	5. Brief description of the character of business conducted in Rhode Island						
Rhode Island	Visual and performing arts and arts education center located in						
4. NAICS Code	Jamestown, RI serving the region.						
711310		J	5				
6. Principal Office Address	.		City	State	Zip		
18 Valley Street			Jamestown	RI	02835		
7. List ALL officers (names and addresses) Check the box to indicate an attachment							
President Name Didi Suydam			Vice-President Name Jody Saarmaa				
Street Address 32 Hamilton Ave.			Street Address 63 OCEAN A-VE.				
^{City} Jamestown	State RI	^{Zip} 02835	City JAMESTOWN	State NI	Zip 02835		
Secretary Name Kate Barber		Treasurer Name Susan Hackman					
Street Address 595 Ten Rod Rd.			Street Address 47 Bow St.				
City Exeter	State RI	^{Z_{ip}} 02822	^{City} Jamestown	State RI	Zio 02835		
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment							
Director Name Erica Connolly			Director Name Bob Dilworth				
Street Address 61 Hamilton Ave.			Street Address 719 River Rd.				
^{City} Jamestown	State RI	^{Zip} 02835	City Providence	State RI	Zip UŽUUO		
Director Name Diane Harrison			Director Name Kara McKamey				
Street Address 62 Keel Ave.			Street Address 59 Shisper Lane				
^{City} Jamestown	State RI	^{Zip} 02835	City North Kingstown	State RI	Z _{IP} 02852		
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 Date							
Didi Suydam 9/25/2023							
Signature of Officer/Authorized Rep	resentative		FILED				
		_					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri gov SEP 28 2023 1:13 pm BY LYS M5 V9H

Jamestown Arts Center

Additional Board Member List

Courtney Hunter 141 Sloop St. Jamestown, RI 02835

Mary Hall Keen 112 Walcott Ave. Jamestown, RI 02835

Devi Ross 20 Ocean Ave. Jamestown, RI 02835

Marie Samuels 22 East 18Th St, 4E New York, NY 10003