Penalty. Additional \$25.00 fee if	form is not filed by	May 31.			99
Entity ID Number	2. Exact name of the Corporation				
001083152	CONSOLFEST				
3. State of Incorporation	5. Brief description of the character of business conducted in Rhode Island				
RHOOF MAND	DUMESTIC NON- POORT TYPE				
4. NAICS Code 8/33/2	FUNDRAISING FOR LEGAL CONTERVATION CONNECTION				
6 Principal Office Address			City	State	Zıp
921 COAST GUARD	10,106	X 571	BLOCK ISLAND	RI	02807
7 List ALL officers (names and add	Iresses)		Ch	eck the box to indicate ar	n attachment
President Name CAMERN GACONIES			Vice-President Name TRACY FINN		
Street Address 921 COAST GUARD LO			Street Address PO 66X 1862		
City LOCK BUSINO	State RI	Zip OZZO }	City BLOCK ISLANC	State	Z1P 62007
Secretary Name AUCE EKY INSKER			Treasurer Name		
Street Address MOLEO 074 80.			Street Address PD 86X 466		
City PHYLAD ELPHIA	State PA	Zip 19/30	City BLOCK 18 LAND	State	Zip SZEVF
8. List ALL directors (names and ac		oorations MUST lis	t at least THREE directors.	neck the box to indicate a	n attachment
Director Name Thanks Contents	<u> </u>	Director Name TAGLOR STEVENS			
Street Address SBI CEWTY PD. 97			Street Address + 3 DECLING ST.		
City PRIACK HANK	State	Zip 80422	City	State M	Zip OH161
Director Name 50-17 MUSEL			Director Name BERNER		
Street Address PO.			Street Address Brandway, APT. 102		
City ED CHESTER	State NY	zip 14612	City NEW YORK	State	18031
9. The Registered Agent information	n of record with th	e RI Department o		require filing Form 641	
Under penalty of perjury, I declar statements, and that all statemer	e and affirm that its contained her	I have examined rein are true and c	this report, including any accorrect.	ccompanying schedu	iles and
This report must be signed by either the Pros	ident, Vice-President, S	Socretary, Assistant Sec	relary, Treasurer, duly Authorized Rep	resentative, Receiver or Trus	dee.
Name of Officer/Authorized Representative CAMERON C. GHEENEE					11/25/28
Signature of Office // Authorized Representative FILED					
MAIL TO:					

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

NOV 29 2023 BY FECX8 A.A. 1'.5 |

Attachment

State of RI Dept of State- Business Services Division Annual Report for the year 2023 Entity ID Number: 001083152 Name of Corporation: ConserFest

Additionally Named Directors:

Eli Sprague 904 Tourtellot Hill Rd. Scituate, RI 02857

Jacqueline Hopkins 1865 West Side Lane Block Island, RI 02807

Name of Officer/Authorized Representative Cameron C. Greenlee

Date 11/25/23

Signature of Officer/Authorized Representative