RI SOS Filing Number: 202445081790 Date: 1/31/2024 11:03:00 AM



State of Rhode Island Office of the Secretary of State

Division Of Business Services 148 W. River Street Providence RI 02904-2615 Fee: \$20.00

(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 - ENTER THE CURRENT YEAR **2024**: 2024

- 1. Corporate ID No. <u>000027357</u>
- **2.** Name of Corporation <u>THE FORT WETHERILL BOAT OWNERS & OPERATORS</u> ASSOCIATION, INC.
- 3. State of Incorporation

State: RI

NAICS CODE

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

713930

4. Principal Office Address

No. and Street: <u>36 CLARKE STREET</u>

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

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

GENERAL RECREATIONAL BOATING

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

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	MICHAEL SCHNACK	36 CLARKE STREET JAMESTOWN, RI 02835 USA
TREASURER	MARK LIBERATI	2 OLD WALCOTT AVE JAMESTOWN, RI 02835 USA
SECRETARY	JUDD SILVIA	15 RESERVOIR CIR JAMESTOWN, RI 02835 USA
VICE PRESIDENT	KARL SEELIG	11 DECK STREET JAMESTOWN, RI 02835 USA
DIRECTOR	MARK LIBERATI	2 OLD WALCOTT AVENUE JAMESTOWN, RI 02835 USA
DIRECTOR	KARL SEELIG	11 DECK STREET JAMESTOWN, RI 02835 USA
DIRECTOR	MICHAEL SCHNACK	36 CLARKE STREET JAMESTOWN, RI 02835 USA
DIRECTOR	JUDD SILVIA	15 RESERVOIR CIR 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

MARK E. LIBERATI 2 OLD WALCOTT AVENUE 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 31 Day of January, 2024 at 11:05:12 AM 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 MARK E. LIBERATI
Signature of Authorized Person

Form No. 631 Revised 09/07

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