



State of Rhode Island
Department of State - Business Services Division

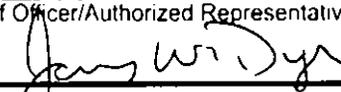
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Annual Report for the year: 2024

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.

1. Entity ID Number 31214		2. Exact name of the Corporation Rhode Island Writers' Guild			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island The Development of Literary Arts and Their Publication			
4. NAICS Code 813990					
6. Principal Office Address 77 Homestead Avenue			City Warwick	State RI	Zip 02889
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Frances Dyer			Vice-President Name Helen E Antonizio		
Street Address 77 Homestead Avenue			Street Address 23 Oak Tree Drive		
City Warwick	State RI	Zip 02889	City Johnston	State RI	Zip 02919
Secretary Name James W Dyer			Treasurer Name James W Dyer		
Street Address 134 Westmoreland Street			Street Address 134 Westmoreland Street		
City Narragansett	State RI	Zip 02882	City Narragansett	State RI	Zip 02882
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Frances Dyer			Director Name Helen E Antonizio		
Street Address 77 Homestead Avenue			Street Address 23 Oak Tree Drive		
City Warwick	State RI	Zip 02889	City Johnston	State RI	Zip 02919
Director Name James W Dyer			Director Name		
Street Address 134 Westmoreland Street			Street Address		
City Narragansett	State RI	Zip 02882	City	State	Zip
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.					
<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 James W Dyer					Date 2/5/2024
Signature of Officer/Authorized Representative 					

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov