State of Rhode Island Fee: \$20.00 Office of the Secretary of State Office			
Division Of Business Services			
148 W. River Street			
Providence RI 02904-2615			
1636 (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. 000030163			
2. Name of Corporation THE TOMAQUAG INDIAN MEMORIAL MUSEUM			
3. State of Incorporation			
State: <u>RI</u>			
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			
712110			
4. Principal Office Address			
No. and Street: <u>390 A SUMMIT ROAD</u>			
City or Town:EXETERState: RIZip: 02822Country: USA			
5. Brief Description of the Character of the Affairs Conducted in Rhode Island			
TO PROMOTE UNDERSTANDING OF THE NATIVE AMERICAN INDIAN, TO			
MAINTAIN A MUSEUM, TO OPERATE A SCHOOL FACILITY NAMED THE			
NUWEETOOUN SCHOOL			
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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	ELISABETH DOVE MANNING	120 NORTH BURNHAM HIGHWAY LISBON, CT 06351 USA
PRESIDENT	KATHARINE KIRAKOSIAN	523 HAZARD RD. WEST GREENWICH, RI 02857 USA
TREASURER	LAWRENCE SHUMATE	5 SHORE DRIVE NARRAGANSETT, RI 02882 USA
SECRETARY	AMANDA THOMPSON	23 RINGGOLD ST PROVIDENCE, RI 02903 USA
DIRECTOR	CLARISSA PUNGOWIYI	3 SIEGEL ST APT A, BRITOL, RI 02809 USA
DIRECTOR	SYLVIA SPEARS	65 BOON ST, NARRAGANSETT, RI 02882 USA
DIRECTOR	CLINTON GARDINER	232 SOUTH MAIN STREET WEST HARTFORD, CT 06107 USA
DIRECTOR	VALERIE TAYLOR	245 COLE AVE PROVIDENCE, RI 02906 USA
DIRECTOR	ROBERT SHUMATE	122 POND ST WAKEFIELD, RI 02879 USA
DIRECTOR	BENJAMIN MORSE	124 EDGEWORTH AVE PROVIDENCE, RI 02904 USA
DIRECTOR	BRIAN LOGAN REID	14 HUTCHINSON LANE LENOX, MA 01240 USA
DIRECTOR	CHRISTIAN HOPKINS	4100 W. 24TH PL APT J01 LAWRENCE, KS 66047 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

LOREN M.SPEARS 390A SUMMIT ROAD EXETER , RI 02822

8. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 26 Day of March, 2024 at 2:55:52 PM 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 LOREN M SPEARS

Signature of Authorized Person

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