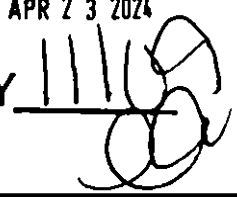




State of Rhode Island
Department of State - Business Services Division

FILED

APR 23 2024

BY 

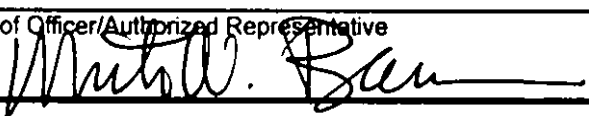
Annual Report for the year: 2023

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.

1. Entity ID Number 000118176		2. Exact name of the Corporation The Warren Cousins, Incorporated	
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island The Family Society of the Descendants of Mayflower Pilgrim Richard Warren and his wife, Elizabeth Walker.	
4. NAICS Code 813219			
6. Principal Office Address 8704 Douglas St.		City Omaha	State NE Zip 68114
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐			
President Name Martin W. Beerman		Vice-President Name George P. Germany Jr., MD	
Street Address 8704 Douglas St.		Street Address 725 S. 10th St.	
City Omaha	State NE	Zip 68114	City Berthoud State CO Zip 80513
Secretary Name Gail Adams		Treasurer Name Keith Kammenzind	
Street Address 211 Fox Trot Way NW		Street Address 1918 Seaton St.	
City Leesburg	State VA	Zip 20176	City Pittsburgh State PA Zip 15226
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment ☐			
Director Name Marsha Berland		Director Name Rev. Dr. W. Becket Soule	
Street Address 201 N. Main St.		Street Address P.O. Box 1359	
City Neilhart	State MT	Zip 59465	City Maggie Valley State NC Zip 28751
Director Name Vicki Barge		Director Name	
Street Address 4917 Theden St.		Street Address	
City Shawnee	State KS	Zip 66218	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.			
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 Martin W. Beerman, President			Date April 16, 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