

## State of Rhode Island \*

## Department of State - Business Services Division

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.

FILED	:
APR 35 2024	,
BY 1 / 1 / 9 3	

1. Entity ID Number 000029733	Exact name of the Corporation     The Steere Family Association Incorporated						
State of Incorporation     Rhode Island     NAICS Code	5. Brief description of the character of business conducted in Rhode Island Annual family reunion, genealogy and cemetery care						
813211							
6 Principal Office Address 1 Jupiter Ln Unit A			City Richmond	State RI	Zip 02898		
7. List ALL officers (names and addresses)  Check the box to indicate an attachment							
President Name Amey Thompson			Vice-President Name Sarah Steere				
Street Address 42623 North 43rd Drive			Street Address PO Box 3527				
City New River	State AZ	<sup>Zip</sup> 85087	<sup>City</sup> Noank	State CT	<sup>Zip</sup> 06340		
Secretary Name Jennifer Steere	Name Jennifer Steere Treasurer Name Dianne Bourget						
Street Address 94 Victory Highway		Street Address 1 Jupiter Ln Unit A					
City Chepachet	State RI	<sup>Zip</sup> 02814	City Richmond	State RI	Zip 02898		
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors.  Check the box to indicate an attachment							
Director Name Randall Steere			Director Name Dr. Diane S. Nobles				
Street Address 15 Drawbridge Rd			Street Address 17 East Pond Rd				
City Westford	State MA	<sup>Zip</sup> 01886	City Narragansett	State RI	<sup>Ζφ</sup> 02882		
Director Name Dr. Clifford W. Brown			Director Name David Steere				
Street Address 4027 Georgetown Square			Street Address 305 Aruba Court				
City Schenectady	State NY	<sup>Zip</sup> 12303	<sup>City</sup> Winnabow	State NC	Zip 28479		
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				Date			
Dianne Bourget				04/20/2024			
Signature of Officer/Authorized Representative    Signature of Officer/Authorized Representative   Signature   Sig							

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.ri.gov

## Entity ID#000029733 The Steere Family Association Incorporated

## 2024 Annual Report Additional Directors

Lois Boire PO Box 11 Chepachet, RI 02814

Lois Dexter 144 Grant Drive North Kingstown, RI 02852

Timothy Reiner 106 Douglas Hook Rd Chepachet, RI 02814

Lori Steere PO Box 2453 North Conway, NH 03860