	State of Rhode Island	Fee: \$20.00
	Office of the Secretary of Stat	e
	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 - N	1ay 1	
	7-6-94, each corporation failing or refusing prescribed by law (R.I.G.L. 7-6-91) is subj	
ANNUAL REPORT YEAR -	ENTER THE CURRENT YEAR <b>2024</b> : <u>2024</u>	
1. Corporate ID No. <u>00</u>	1686228	
2. Name of Corporation <u>R</u>	otary Club of Jamestown	
3. State of Incorporation		
State: <u>RI</u>		
	NAICS CODE	
primary type of activity in v populate a NAICS Code ba	d NAICS Code below, select the classificati which your entity engages. The box to the ri sed on the chosen selection. If the NAICS ( assistance with selecting a classification <u>cl</u>	ght of the dropdown will Code is known, enter it into the
NAICS Code		
<u>813319</u>		
4. Principal Office Addres	S	
No. and Street: 87 NAR	RAGANSETT AVENUE	
City or Town: <u>JAMES</u>		Zip: <u>02835</u> Country: <u>USA</u>
5. Brief Description of the	Character of the Affairs Conducted in Rho	ode Island
WORLD UNDERSTAND	TO THE COMMUNITY, PROMOTE IN DING, GOODWILL AND PEACE THRC SIONAL AND COMMUNITY LEADER	UGH THE FELLOWSHIP
6. Names and Addresses	of the Officers and Directors:	
All Directors and Officers Island Corporation shall n	must be listed individually. The number o ot be less than 3.	f DIRECTORS of a Rhode

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JOHN T. GOOD	56 GRINNELL STREET JAMESTOWN, RI 02835 USA
TREASURER	JEFFREY W. GRAVDAHL	19 SEAFARER COURT JAMESTOWN, RI 02835 USA
SECRETARY	LAWRENCE BARTLWY	2 SPINDRIFT STREET JAMESTOWN, RI 02835 USA
DIRECTOR	HARLEY LEE	44 SPANKER STREET JAMESTOWN, RI 02835 USA
DIRECTOR	WIN REED	40 GREEN LANE JAMESTOWN, RI 02835 USA
DIRECTOR	ROSS HARRIS	75 HAMILTON AVENUE 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

LAWRENCE BARTLEY 2 SPINDRIFT STREET 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 28 Day of April, 2024 at 1:34:11 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 JEFFREY W. GRAVDAHL Signature of Authorized Person

Form No. 631 Revised 09/07

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