



**State of Rhode Island  
Office of the Secretary of State**

**Fee: \$20.00**

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(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.** 001678876

**2. Name of Corporation** Mile of History Association

**3. State of Incorporation**

State: RI

**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 [click here](#).

NAICS Code

813319

**4. Principal Office Address**

No. and Street: 1 GOVERNOR ST

City or Town: PROVIDENCE State: RI Zip: 02906-3003 Country: USA

**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**

SHALL OPERATE FOR COMMUNITY CIVIC CHARITABLE AND EDUCATIONAL PURPOSES SHALL WORK TO PROTECT PRESERVE AND ENHANCE THE HISTORIC AND ARCHITECTURAL HERITAGE OF PROVIDENCES MILE OF HISTORY DISTRICT IN ORDER TO INSURE ITS CONTINUED DESIGNATION IN THE NATIONAL REGISTER OF HISTORIC PLACES

**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.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	VINCENT J BUONANNO	30 BENEFIT STREET PROVIDENCE, RI 02904 USA
TREASURER	ROSALIND RUSTIGIAN	1 GOVERNOR ST PROVIDENCE, RI 02906-3003 USA
SECRETARY	CHARLES HEWITT	35 BENEFIT STREET PROVIDENCE, RI 02904 USA
VICE PRESIDENT	LIZ MAURAN	151 POWER STREET PROVIDENCE, RI 02906 USA
DIRECTOR	TIMOTHY MORE	135 BENEFIT ST PROVIDENCE, RI 02903 USA
DIRECTOR	ALEX PROCASKEY	24 BENEFIT ST PROVIDENCE, RI 02904 USA
DIRECTOR	DANIEL BAUDOUIIN	48 KETTLE POINT RD RIVERSIDE, RI 02915 USA
DIRECTOR	BRENT RUNYON	9 HOLLYWOOD RD PROVIDENCE, RI 02909 USA
DIRECTOR	EDITH AJELLO	29 BENEFIT ST PROVIDENCE, RI 02904 USA
DIRECTOR	HARRY ADLER	143 SHELDON ST CRANSTON, RI 02905 USA
DIRECTOR	FRANK FALTUS	124 CONGDON ST PROVIDENCE, RI 02906 USA
DIRECTOR	BARRY FAIN	48 CONGDON ST PROVIDENCE, RI 02906 USA
DIRECTOR	TAYO HEUSER	418 BENEFIT ST PROVIDENCE, RI 02906 USA
DIRECTOR	CYNTHIA VENTRE HEWETT	35 BENEFIT ST PROVIDENCE, RI 02904 USA
DIRECTOR	RICHARD GILBANE	364 BENEFIT ST PROVIDENCE, RI 02903 USA
DIRECTOR	WILLIAM APPLGATE	106 BENEFIT ST PROVIDENCE, RI 02903 USA
DIRECTOR	CARL FARMER	362 BENEFIT ST PROVIDENCE, RI 02903 USA
DIRECTOR	PAUL KAPPEL	151 PRATT ST PROVIDENCE, RI 02906 USA
DIRECTOR	GRACE FARMER	362 BENEFIT ST PROVIDENCE, RI 02903 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**

VINCENT J. BUONANNO 30 BENEFIT STREET PROVIDENCE , RI 02904

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

**Signed this 14 Day of May, 2024 at 6:58:12 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 ROSALIND RUSTIGIAN  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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