



**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. 001713091

2. Name of Corporation Protect Conanicut Coastline, Inc.

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

813312

4. Principal Office Address

No. and Street: 1026 EAST SHORE ROAD

City or Town: JAMESTOWN

State: RI

Zip: 02835

Country: USA

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

TO PROTECT AND PRESERVE THE UNIQUE AND SPECTACULAR COASTLINE OF CONANICUT ISLAND FOR CURRENT AND FUTURE GENERATIONS, IN ACCORDANCE WITH THE JAMESTOWN COMPREHENSIVE COMMUNITY PLAN; TO ACT AS AN ADVOCATE TO ENSURE THAT ECOLOGICAL SYSTEMS ARE SAFEGUARDED AND THAT COASTAL WATERS ARE SWIMMABLE, FISHABLE AND ACCESSIBLE; AND TO ENGAGE AND INFORM THE COMMUNITY REGARDING THIS ENVIRONMENTAL TREASURE AND PROMOTE A SAFE AND SUSTAINABLE BALANCE AMONG ALL USERS OF OUR ISLAND'S COASTAL RESOURCES.

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
DIRECTOR	WILLIAM M SALMONS JR	115 MELROSE AVE JAMESTOWN, RI 02835 USA
DIRECTOR	ROBIN SQUIBB	200 WATERWAY SAUNDERSTOWN, RI 02874 USA
DIRECTOR	BRADFORD WHITMAN	343 BEAVERTAIL ROAD JAMESTOWN, RI 02835 USA
DIRECTOR	WILLIAM HUTCHINSON	79 HAMILTON AVE. JAMESTOWN, RI 02835 USA
DIRECTOR	ANNE W. GARNETT	46 COLE STREET JAMESTOWN, RI 02835 USA
DIRECTOR	PETER DELANCEY CONVERSE	162 NARRAGANSETT AVE JAMESTOWN, RI 02835 USA
DIRECTOR	STUART C. ROSS	1026 EAST SHORE RD. 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

STUART C. ROSS 1026 EAST SHORE ROAD 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 31 Day of May, 2024 at 4:39:27 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 WILLIAM SALMONS
Signature of Authorized Person

Form No. 631
Revised 09/07