		State of Rhoo Office of the Secr		te	Fee: \$20.00
		Division Of Busin	ess Services		
		148 W. Rive	r Street		
		Providence RI 0			
/630		(401) 222-	3040		
Non-Profit Corp Annual Report Filing Period: Feb		y 1			
	nin the time p	6-94, each corporation fail rescribed by law (R.I.G.L.			
ANNUAL REPOR	T YEAR - <mark>EN</mark>	ITER THE CURRENT YEAF	2024 : <u>202</u> 4	<u>l</u>	
1. Corporate ID	No. <u>0000</u>	26522			
2. Name of Corp	oration <u>Nar</u>	ragansett Tribe of Indians			
3. State of Incor	poration				
State: <u>RI</u>					
		NAICS COL	ЭE		
primary type of a populate a NAIC	ictivity in whi S Code base	NAICS Code below, select ch your entity engages. Th d on the chosen selection. ssistance with selecting a	ne box to the If the NAICS	right of the dropdow Code is known, ente	n will
NAICS Code					
<u>813990</u>					
4. Principal Offic	ce Address				
No. and Street:	<u>4533 SOU</u> <u>P.O. BOX</u>	<u>TH COUNTY TRAIL</u> 268			
	<u>CHARLES</u>		State: <u>RI</u>	Zip: 02813 Coun	
City or Town:					try: <u>USA</u>
	ion of the Cł	naracter of the Affairs Co	nducted in Rh	ode Island	try: <u>USA</u>
		naracter of the Affairs Co	nducted in Rh	ode Island	try: <u>USA</u>
5. Brief Descript	IRS	naracter of the Affairs Con		ode Island	try: <u>USA</u>
5. Brief Descript INDIAN AFFA	<u>IRS</u> ddresses of ⁻ d Officers m	the Officers and Director ust be listed individually.	s:		

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country	
DIRECTOR OF FINANCE	SPEEDI G BURRELL	4533 SOUTH COUNTY TRAIL CHARLESTOWN, RI 02813 USA	
2ND COUNCIL PERSON	MIKE MONROE	4533 SOUTH COUNTY TRAIL CHARLESTOWN, RI 02813 USA	
1ST COUNCIL PERSON	CASSIUS SPEARS JR	4533 SOUTH COUNTY TRAIL CHARLESTOWN, RI 02813 USA	
CHIEF SACHEM	ANTHONY D STANTON	4533 SOUTH COUNTY TRAIL CHARLESTOWN, RI 02813 USA	
DIRECTOR	JOHN MAHONEY	4533 SOUTH COUNTY TRAIL CHARLESTOWN, RI 02813 USA	
DIRECTOR	JOHN POMPEY	4533 SOUTH COUNTY TRAIL CHARLESTOWN, RI 02813 USA	
DIRECTOR	RAYMOND LAMPHERE	4533 SOUTH COUNTY TRAIL CHARLESTOWN, RI 02813 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

SPEEDI G. BURRELL 4533 SOUTH COUNTY TRAIL CHARLESTOWN , RI 02813

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

Signed this 6 Day of June, 2024 at 1:49:34 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 SPEEDI BURRELL

Signature of Authorized Person

Form No. 631 Revised 09/07

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