



State of Rhode Island
Department of State - Business Services Division

FILED

Annual Report for the year:
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.

JAN 23 2025

BY

1 Entry ID Number 57804		2 Exact name of the Corporation Bernadette Conte Ltd.	
3 State of Incorporation RI		5 Brief description of the character of business conducted in Rhode Island I'm an author of historical books, and a film producer.	
4 NAICS Code 711510			
6 Principal Office Address 20 Cardi Circle		City Cranston	State RI
		Zip 0292	
7 List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Bernadette Conte		Vice-President Name Ralph C. Conte Jr.	
Street Address 20 Cardi Circle		Street Address 126 Hamilton St.	
City Cranston	State RI	City Jamestown	State RI
Zip 02920		Zip 02835	
Secretary Name Katherine M. Conte		Treasurer Name Bernadette Conte	
Street Address 355 Gilbert Stuart Drive		Street Address 20 Cardi Circle	
City E. Greenwich	State RI	City Cranston	State RI
Zip 02818		Zip 02920	
8 List ALL directors (names and addresses) RI Corporations MUST list at least THREE directors Check the box to indicate an attachment <input type="checkbox"/>			
Director Name Bernadette Conte		Director Name Ralph C. Conte Jr.	
Street Address 20 Cardi Circle		Street Address 126 Hamilton St.	
City Cranston	State RI	City Jamestown	State RI
Zip 02920		Zip 02835	
Director Name Katherine Conte		Director Name	
Street Address 355 Gilbert Stuart Dr.		Street Address	
City E. Greenwich	State RI	City	State
Zip 02818		Zip	
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 Bernadette Conte			Date 1/15/25
Signature of Officer/Authorized Representative <i>Bernadette Conte, Inc.</i>			