

**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 2025:** 2025**1. Corporate ID No.** 000117386**2. Name of Corporation** Tiverton Lions Club Charities, 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

813990**4. Principal Office Address**No. and Street: 161 FUREY AVENUECity or Town: TIVERTONState: RIZip: 02878Country: USA**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**SOLICIT, COLLECT AND OTHERWISE RAISE MONEY FOR CHARITABLE PURPOSES**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<br>First, Middle, Last, Suffix | Address<br>Address, City or Town, State, Zip Code, Country |
|-------|------------------------------------------------|------------------------------------------------------------|
|-------|------------------------------------------------|------------------------------------------------------------|

|           |                    |                                                     |
|-----------|--------------------|-----------------------------------------------------|
| TREASURER | ROBERT VALCOURT    | 32 PIERCE AVE<br>TIVERTON, RI 02878 USA             |
| SECRETARY | ROSEMARY BOWERS    | 161 FUREY AVENUE<br>TIVERTON, RI 02878 USA          |
| SECRETARY | ROSEMARY BOWERS    | 161 FUREY AVENUE<br>TIVERTON, RI 02878 UNI          |
| DIRECTOR  | ELAINE BRISTOL     | 64 LONG PASTURE RD<br>LITTLE COMPTON, RI 02537 USA  |
| PRESIDENT | DAWN CABRAL QUIMBY | 221 HORNBINE RD<br>REHOBOTH, MA 02769 USA           |
| DIRECTOR  | JEANNE TRAVERS     | 57 MASSACHUSSETTE AVE<br>PORTSMOUTH, RI 02871 USA   |
| DIRECTOR  | PATRICIA DUBOIS    | 381 CLARKSON ST<br>FALL RIVER, MA 02724 USA         |
| DIRECTOR  | LEE CUSUMANO       | 59 FERRY LANDING CIRCLE<br>PORTSMOUTH, RI 02871 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**

JAMES A. DONNELLY 64 KENYON ROAD P.O. BOX 148 TIVERTON , RI 02878

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

**Signed this 17 Day of February, 2025 at 6:43:59 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 ROSEMARY BOWERS  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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