

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023 **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



→ Penalty Additional \$25.00 fee i	f form is not filed b	y May 31.			
1 Entity ID Number 000029693	Exact name of the Corporation Rhode Island Christmas Tree Growers Association				
3. State of Incorporation	5. Brief description of the character of business conducted in Rhode Island				
RI	An organization of farmers who grow and sell Christmas Trees for sale				
4. NAICS Code	who have joined for marketing, information and best practices sharing				
111421					
6. Principal Office Address			City	State	Zıp
4191 Main Road			Tiverton	RI	02878
7. List ALL officers (names and ad	dresses)			neck the box to indicate a	n attachment
President Name Eric Watne			Vice-President Name Karen Menezes		
Street Address 4191 Main Road			Street Address 73 Middle Road		
^{City} Tiverton	State RI	^{Zıp} 02878	^{Crty} Portsmouth	State RI	^{Zip} 02871
Secretary Name John Leyden			Treasurer Name Emily Watne		
Street Address 179 Plain Meeting House Road			Street Address 4191 Main Road		
City West Greenwich	State RI	^{Z_{ip}} 02817	^{City} Tiverton	State RI	Zip 02878
8. List ALL directors (names and a	iddresses). RI Co	rporations MUST I		heck the box to indicate a	an attachment
Director Name Bob Johnson			Director Name Jeanie Bento		
Street Address 97 South Lake Road			Street Address 4484 Main Road		
^{City} Tiverton	State RI	^{Zip} 02878	^{City} Tiverton	State RI	Zip U2010
Director Name Catherine Grant Watne			Director Name		
Street Address 4191 Main Road			Street Address		
^{City} Tiverton	State RI	^{Zip} 02878	City	State	Zıp
9. The Registered Agent information	on of record with	the RI Department	of State is accurate. Changes	require filing Form 64	1.
Under penalty of perjury, I decla statements, and that all stateme			·	accompanying sched	lules and
This report must be signed by either the Pre	· · · · · · · · · · · · · · · · · · ·	Secretary, Assistant S	Secretary, Treasurer, duly Authorized Rej	presentative, Receiver or Tru	istee
Name of Officer/Authorized Representative			EUSD	Date	
Eric Watne			FILED	02/27/2025	
Signature of Officer/Authorized)Re	presentative		NAD 0 4 2025		
MAR 0 4 2025					
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MAIL TO:

Division of Business Services

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