



State of Rhode Island
Department of State - Business Services Division

FILED

MAR 12 2025

BY

Annual Report for the year: 2025**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.

1. Entity ID Number 000064318		2. Exact name of the Corporation South Kingstown neighborhood Congress, Inc.			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island A non-partisan voice for neighborhood groups in South Kingstown, RI			
4. NAICS Code 813319					
6. Principal Office Address 60 Walden Way			City Wakefield	State RI	Zip 02879
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Leslie Chouinard			Vice-President Name Marc Levitt		
Street Address 11 Emmett Lane			Street Address 100 Orchard Avenue		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
Secretary Name Mary E. O'Rourke			Treasurer Name None		
Street Address 60 Walden Way			Street Address		
City Wakefield	State RI	Zip 02879	City	State	Zip
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment ☐					
Director Name David Flanders			Director Name Joanne Melish		
Street Address 1148B Curtis Corner Road			Street Address 84 Lake Street		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
Director Name Marc Levitt			Director Name		
Street Address 100 Orchard Avenue			Street Address		
City Wakefield	State RI	Zip 02879	City	State	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.					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative Mary E. O'Rourke					Date 3/8/2025
Signature of Officer/Authorized Representative 					

MAIL TO:
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