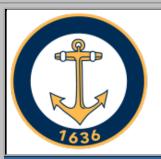
RI SOS Filing Number: 202568640780 Date: 3/31/2025 6:26:00 PM



## 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**: <u>2025</u>

- 1. Corporate ID No. <u>000485652</u>
- 2. Name of Corporation Swamp Meadow Community Theatre, 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 <u>click here.</u>

NAICS Code

711110

4. Principal Office Address

No. and Street: <u>2 TRAY HOLLOW ROAD</u>

City or Town: FOSTER State: RI Zip: 02825 Country: USA

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

COMMUNITY THEATRE, PLAYS, WORKSHOPS AND CLASSES (501(C)(3))

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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country

VICE PRESIDENT	MERYNN FLYNN	2 TRAY HOLLOW ROAD FOSTER, RI 02825 USA
SECRETARY	SHARON SAFFORD	2 TRAY HOLLOW ROAD FOSTER, RI 02825 USA
TREASURER	JUDITH A KERKHOFF	2 TRAY HOLLOW ROAD FOSTER, RI 02825 USA
DIRECTOR	ANDREW AFLECK	2 TRAY HOLLOW ROAD FOSTER, RI 02825 USA
DIRECTOR	AUDREY DUBOIS	2 TRAY HOLLOW ROAD FOSTER, RI 02825 USA
DIRECTOR	SHARON SAFFORD	2 TRAY HOLLOW ROAD FOSTER, RI 02825 USA
DIRECTOR	SHANNON MCCLOUD	2 TRAY HOLLOW ROAD FOSTER, RI 02825 USA
DIRECTOR	ALICE LEAR	2 TRAY HOLLOW ROAD FOSTER, RI 02825 USA
DIRECTOR	DENNIS CHRETIEN	2 TRAY HOLLOW ROAD FOSTER, RI 02825 USA
DIRECTOR	MARY JO CHRETIEN	2 TRAY HOLLOW ROAD FOSTER, RI 02825 USA
DIRECTOR	JONATHAN SAFFORD	2 TRAY HOLLOW ROAD FOSTER, RI 02825 USA
DIRECTOR	MERYNN FLYNN	2 TRAY HOLLOW ROAD FOSTER, RI 02825 USA
DIRECTOR	GABBY DWORKIN	2 TRAY HOLLOW ROAD FOSTER, RI 02825 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

<u>LAURIE MURPHY 2 TRAY HOLLOW ROAD FOSTER</u>, <u>RI 02825</u>

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

**Signed this 31 Day of March, 2025 at 6:35:32 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 <u>JUDITH A KERKHOFF</u> Signature of Authorized Person © 2007 - 2025 State of Rhode Island All Rights Reserved