

**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.** 001715193**2. Name of Corporation** Beacon Pole Hill Chapter NSDAR**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

541720**4. Principal Office Address**No. and Street: 7 HILLSIDE ROADCity or Town: CUMBERLANDState: RIZip: 02864Country: USA**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**HISTORICAL PRESERVATION, EDUCATION AND SUPPORT OF PATRIOTIC
ENDEAVORS**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
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
SECRETARY	REBECCA COLLEMER	9 BRILL LANE CUMBERLAND, RI 02864 USA
CHAPLIN	AUDREY GODIN	1201 POUND HILL ROAD NORTH SMITHFIELD, RI 02896 USA
TREASURER	KAREN LOUISE FLORA	20 CHERRYBROOK AVE NORTH SMITHFIELD, RI 02896 USA
DIRECTOR	REBECCA BENNETT FAIRBANK	7 HILLSIDE ROAD CUMBERLAND, RI 02864 USA
DIRECTOR	KAREN LOUISE FLORA	20 CHERRYBROOK AVE NORTH SMITHFIELD, RI 02896 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

AUDREY L. GODIN 1201 POUND HILL ROAD NORTH SMITHFIELD , RI 02896

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

Signed this 2 Day of April, 2025 at 11:03:53 AM 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 KAREN FLORA
Signature of Authorized Person

Form No. 631
Revised 09/07

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