RI SOS Filing Number: 202568785120 Date: 4/2/2025 11:35:00 AM



## 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. 000089847
- 2. Name of Corporation Museum of Newport Irish History, 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

813990

## 4. Principal Office Address

No. and Street: P.O. BOX 1378

City or Town: <u>NEWPORT</u> State: <u>RI</u> Zip: <u>02840</u> Country: <u>USA</u>

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

TO OPERATE AND MAINTAIN A MUSEUM OR LIKE ENTITY OF IRISHHISTORY IN THE NEWPORT RI AREA.

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
PRESIDENT	DEANNA J CONHEENEY	55 HAMMOND ST NEWPORT, RI 02840 USA
TREASURER	CAROL J LEPLEY	19 CIRCLE DR MIDDLETOWN, RI 02842 USA
SECRETARY	MARGARET A MURRAY	2 GREEN PLACE NEWPORT, RI 02840 USA
VICE PRESIDENT	JAMES RYAN	13 BLISS RD NEWPORT, RI 02840 USA
VICE PRESIDENT	RICHARD ONEILL	11 GARFIELD ST NEWPORT, RI 02840 USA
DIRECTOR	LAWRENCE J BARTLEY JR	2 SPRINDRIFT JAMESTOWN, RI 02835 USA
DIRECTOR	KEVIN DOYLE	52 COLONIAL AVE TIVERTON, RI 02878 USA
DIRECTOR	HENRY WINTHROP	49 BATEMAN AVE NEWPORT, RI 02840 USA
DIRECTOR	ANN ARNOLD	73 KAY ST NEWPORT, RI 02840 USA
DIRECTOR	STEPHEN FERRIS	7 WELLINGTON AVE NEWPORT, RI 02840 USA
DIRECTOR	JOHN QUINN	11 CIRCLE DR MIDDLETOWN, RI 02842 USA
DIRECTOR	DAN TITUS	383 PARADISE AVE MIDDLETOWN, RI 02842 USA
DIRECTOR	JERRY HARRINGTON	P.O. BOX 98 NEWPORT, RI 02840 USA
DIRECTOR	MAEVE SHEEHAN	15 BAYSIDE AVE MIDDLETOWN, RI 02842 USA
DIRECTOR	STEPHEN MARINO	214 SPRING ST NEWPORT, RI 02840 USA
DIRECTOR	DONNA MCCARTHY	45 WILLIAM ST NEWPORT, RI 02840 USA
DIRECTOR	JOHN MCCORMACK	7 NORMAN RD JAMESTOWN, RI 02835 USA
DIRECTOR	KATHLEEN PAPP	52 AYRAULT ST NEWPORT, RI 02840 USA
DIRECTOR	MICHAEL SLEIN	428 GIBBS AVE NEWPORT, RI 02840 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

CHRISTOPHER J. BEHAN 294 VALLEY ROAD MIDDLETOWN, RI 02842

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 11:41:52 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 CAROL LEPLEY

Signature of Authorized Person

Form No. 631 Revised 09/07

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