State of Rhode Island
Office of the Secretary of State

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Fee: $20.00

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. 000028653

2. Name of Corporation THE CHARLESTOWN HISTORICAL SOCIETY

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
712110

4. Principal Office Address

No. and Street: 4417 OLD POST ROAD
City or Town: CHARLESTOWN State: RI Zip: 02813 Country: USA

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

HICTORICAL PRESERVATION

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

TREASURER	JOHN KELLEY	4380 OLD POST ROAD CHARLESTOWN, RI 02813 USA
SECRETARY	ERICA PERRY	50 TOWN DOCK ROAD CHARLESTOWN, RI 02813 USA
VICE PRESIDENT	ALAN ANGELO	39 INDIAN TRAIL CHARLESTOWN, RI 02813 USA
PRESIDENT	PAM LYONS	50 TOWN DECK ROAD CHARLESTOWN, RI 02813- USA
DIRECTOR	DAN ALVES	90 GRANDBROOK CIRCLE APT 1514 WAKEFIELD, RI 02879 USA
DIRECTOR	PAULA ANDERSON	79 GENWOOD DRIVE CHARLESTOWN, RI 02813 USA
DIRECTOR	ELIZABETH SHEA	62 KLONDIKE ROAD CHARLESTOWN, RI 02813 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

JOHN P. KELLEY 4380 OLD POST ROAD P.O. BOX 220 CHARLESTOWN , RI 02813

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

Signed this 13 Day of April, 2025 at 12:47:57 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 JOHN KELLEY
Signature of Authorized Person

Form No. 631
Revised 09/07