

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. 000081205
- 2. Name of Corporation NORTHEAST ARC USERS GROUP-NEARC
- 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

813920

4. Principal Office Address

No. and Street: 1352 DUGAR BROOK RD.

City or Town: <u>EAST CALAIS</u> State: <u>VT</u> Zip: <u>05650</u> Country: <u>USA</u>

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

TO PROVIDE AN EDUCATIONAL FORUM AND INFORMATION EXCHANGE FOR GIS USERS IN NORTHEAST U.S.

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		Title
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	NATHANIAL WARD	2456 LAFAYETTE RD, SUITE 5 PORTSMOUTH, NH 03801 USA
TREASURER	PAMELA DEANDREA	1352 DUGAR BROOK RD. EAST CALAIS, VT 05650 USA
DIRECTOR	KRISTINA SARGENT	2 VICTOR AVE NASHUA, NH 03060 USA
DIRECTOR	BRITTANY HOFFNAGLE	107 WATERHOUSE RD BOURNE, MA 02532 USA
DIRECTOR	ERICA TEFFT	180 BEAMAN ST WEST BOYLSTON, MA 01583 USA
DIRECTOR	ANITA BEINIKIS	20 RIVERSIDE DR LAKEVILLE, MA 02347 USA
DIRECTOR	ROBERT CRAIG	TOWN HALL, 34 BROADWAY ROCKPORT, MA 01966 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

ROBERT LEBLANC 1050 MAIN STREET, SUITE 6 EAST GREENWICH, RI 02818

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

Signed this 21 Day of April, 2025 at 12:53:20 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>PAMELA DEANDREA</u> Signature of Authorized Person

Form No. 631 Revised 09/07

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