



**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.** 000027727

**2. Name of Corporation** The Friends of The Newport Public Library, 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 [click here](#).

NAICS Code

813990

**4. Principal Office Address**

No. and Street: 300 SPRING ST

City or Town: NEWPORT

State: RI

Zip: 02840

Country: USA

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

TO SUPPORT AND RAISE FUNDS FOR THE NEWPORT PUBLIC LIBRARY

**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

PRESIDENT	EDWINA SEBEST	23 OLD BEACH RD NEWPORT, RI 02840 US
SECRETARY	EDNA OCONNELL	7 WEBSTER STREET NEWPORT, RI 02840 USA
TREASURER	PATRICIA HELLER	9 HOPE ST NEWPORT, RI 02840-2614 USA
DIRECTOR	MARY JO VALDES	48 SECOND ST NEWPORT, RI 02840 USA
DIRECTOR	AUDREY GRIMES	641 MIDDLE ROAD PORTSMOUTH, RI 02871 USA
DIRECTOR	CAROL TURCOTTE	50 HUNTER AVE NEWPORT, RI 02840 USA
DIRECTOR	DOROTHY MURPHY	11 CHAMPLIN ST NEWPORT, RI 02840 USA
DIRECTOR	MARILYN RODERICK	38 SHEFFIELD 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**

ANNE SHEPARD 300 SPRING STREET NEWPORT , RI 02840

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

**Signed this 24 Day of April, 2025 at 11:34:48 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 PATRICIA HELLER  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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