



**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. 001690083

2. Name of Corporation Clann Lir Association

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

813410

4. Principal Office Address

No. and Street: 12 EAGLE STREET

UNIT 310

City or Town: PROVIDENCE

State: RI

Zip: 02908

Country: USA

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

LAWFUL PURPOSE THE PURPOSE OF THE CORPORATION IS TO EXCLUSIVELY ENGAGE IN ANY LAWFUL ACT OR ACTIVITY FOR WHICH NOT FOR PROFIT CORPORATIONS MAY BE ORGANIZED UNDER THE LAWS OF THE STATE OF RHODE ISLAND AND UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, OR ANY CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE. SPECIFIC PURPOSE THE SPECIFIC PURPOSE FOR WHICH THIS COOPERATION IS ORGANIZED IS TO PROMOTE, PRESERVE AND SHARE IRISH DANCE TRADITION THROUGH

EDUCATION AND CHARITABLE PROGRAMMING.

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	KELLY GATELY	15 KENTS LANE HINGHAM, MA 02043 USA
TREASURER	KELLY GATELY	15 KENTS LANE HINGHAM, MA 02043 USA
VICE PRESIDENT	KATE SULLIVAN	7 WHITCOMB LANE HINGHAM, MA 02043 USA
DIRECTOR	ANN TARSAGIAN	137 HIGH HILL ROAD TIVERTON, RI 02878 USA
DIRECTOR	KRISTIN BENNETT	28 SAMUEL WOODWORTH ROAD NORWELL, RI 02061 USA
DIRECTOR	KELLY GATELY	15 KENTS LANE HINGHAM, MA 02043 USA
DIRECTOR	KATE SULLIVAN	7 WHITCOMB LANE HINGHAM, MA 02043 USA
DIRECTOR	ANTHONY FALLON	12 EAGLE STREET #310 PROVIDENCE, RI 02908 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

KELLY GATELY 387 WICKENDEN STREET UNIT 4 PROVIDENCE , RI 02903

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

Signed this 25 Day of April, 2025 at 3:23:01 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 KELLY GATELY

Signature of Authorized Person

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