

**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.** 000028766**2. Name of Corporation** Mount Tom Club**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

813319**4. Principal Office Address**No. and Street: 511 ELMGROVE AVENUECity or Town: PROVIDENCEState: RI Zip: 02906 Country: USA**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**LAND CONSERVATION**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	DAVID KROESSLER DR.	511 ELMGROVE PROVIDENCE, RI 02906 USA
TREASURER	EDWARD ZIEGLER	9 LAUREL AVENUE PROVIDENCE, RI 02906 USA
SECRETARY	MARK HOFF	15 EMELINE STREET PROVIDENCE, RI 02906 USA
VICE PRESIDENT	WILL GLENN PHELPS	P.O. BOX 2809 NANTUCKET, MA 02584 USA
DIRECTOR	DAVID KROESSLER	511 ELMGROVE AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	JOHN SAHAGIAN	248 S. PIER RD. NARRAGANSETT, RI 02882 USA
DIRECTOR	EDWARD ZIEGLER	9 LAUREL AVENUE PROVIDENCE, RI 02906 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

DEREK KROESSLER 511 ELMGROVE AVE. PROVIDENCE , RI 02906

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

Signed this 26 Day of April, 2025 at 2:58:13 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 DEREK KROESSLER
Signature of Authorized Person

Form No. 631
Revised 09/07

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