



**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. 000030401

2. Name of Corporation RHODE ISLAND JEWISH HISTORICAL 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

712110

4. Principal Office Address

No. and Street: 401 ELMGROVE AVE

City or Town: PROVIDENCE

State: RI

Zip: 02906

Country: USA

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

RESEARCH, PUBLICATION AND COLLECTING DOCUMENTS IN RHODE ISLAND
JEWISH HISTORY

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
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	LINDA LOTRIDGE LEVIN	282 DOYLE AVE. PROVIDENCE, RI 02906 USA
TREASURER	LAWRENCE GINSBERG	21 KNAPTON STREET BARRINGTON, RI 02806 USA
SECRETARY	RUTH BREINDEL	617 HOPE ST. PROVIDENCE , RI 02906 USA
VICE PRESIDENT	LOWELL LISKER	10 PILGRIM CIRCLE WARWICK, RI 02888 USA
VICE PRESIDENT	DAVID BAZAR	70 N. CLIFF DR. NARRAGANSETT, RI 02882 USA
DIRECTOR	HAROLD FOSTER	16 COLUMBUS AVE. BARRINGTON, RI 02806 USA
DIRECTOR	GIOVANNA WISEMAN	11 MASSASOIT RD. SHARON, MA 02067 USA
DIRECTOR	CLIFF KARTEN	4 LISTER DR. BARRINGTON , RI 02806 US
DIRECTOR	CYNTHIA BENJAMIN	122 MINERVA ST. WOONSOCKET, RI 02895 USA
DIRECTOR	ROBERT KEMP	16 LANTERN LANE BARRINGTON, RI 02806 USA
DIRECTOR	MARILYN MYROW	62 ROCKRIDGE RD. LINCOLN, RI 02865 USA
DIRECTOR	LAWRENCE KATZ	288 ELMGROVE AVE. PROVIDENCE, RI 02906 USA
DIRECTOR	DEBORAH CARR	56 WOODBURY ST. PROVIDENCE, RI 02906 USA
DIRECTOR	MEL TOPF	26 ASTRAL 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

STEPHEN M. BROWN 130 SESSIONS STREET 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 29 Day of April, 2025 at 12:58:48 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 JAIME WALDEN

Signature of Authorized Person

Form No. 631
Revised 09/07

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