RI SOS Filing Number: 202573042180 Date: 5/14/2025 11:27:00 AM



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. 001700407
- 2. Name of Corporation Friends of Knight Memorial Library
- 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

<u>624190</u>

4. Principal Office Address

No. and Street: 275 ELMWOOD AVENUE

103 PRINCETON AVENUE

City or Town: PROVIDENCE State: RI Zip: 02907 Country: USA

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

THE FRIENDS OF KNIGHT MEMORIAL LIBRARY SUPPORT ITS HISTORIC LIBRARY AND THE

EVOLVING NEEDS OF ITS SURROUNDING NEIGHBORHOODS THROUGH FUNDRAISING,

PROGRAMMING AND VOLUNTEER SERVICE.

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	DOUGLAS R. VICTOR	103 PRINCETON AVENUE PROVIDENCE, RI 02907 USA
TREASURER	ROCHELLE LEE	172 ONTARIO STREET PROVIDENCE, RI 02907 US
DIRECTOR	BARBARA MORIN	56 ARDOENE STREET PROVIDENCE, RI 02907 US
DIRECTOR	BRENDA FLOREZ	84 PRINCETON AVENUE PROVIDENCE, RI 02907 US
DIRECTOR	MARY HILLINSHEAD	229 MEDWAY STREET PROVIDENCE, RI 02906 US

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

ROCHELLE LEE 172 ONTARIO STREET PROVIDENCE, RI 02907

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

Signed this 14 Day of May, 2025 at 11:33:30 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 <u>DOUGLAS VICTOR</u> Signature of Authorized Person

Form No. 631 Revised 09/07

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