



State of Rhode Island
Department of State - Business Services Division

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV

2025 JUL -2 A 10:46

Annual Report for the year: 2025

Non-Profit Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 74393		2. Exact name of the Corporation Rhode Island Romance Writers			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island To promote excellence in popular fiction; to help writers become published			
4. NAICS Code 813990					
6. Principal Office Address 8 Gallup St			City Westerly	State RI	Zip 02891
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Anita Greene			Vice-President Name Janet Bann Jones		
Street Address 8 Gallup St			Street Address 5300 Parkview Dr Apt 1082		
City Westerly	State RI	Zip 02891	City Lake Oswego	State OR	Zip 97035
Secretary Name N/A			Treasurer Name Marylou Brown		
Street Address			Street Address 218 Main St		
City	State	Zip	City Ashaway	State RI	Zip 02804
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment ☐					
Director Name Anita Greene			Director Name Janet Bann Jones		
Street Address 8 Gallup St			Street Address 5300 Parkview Dr Apt 1082		
City Westerly	State RI	Zip 02891	City Lake Oswego	State OR	Zip 97035
Director Name Marylou Brown			Director Name Lynda Clarke		
Street Address 218 Main St			Street Address 31 Barnett St 3rd floor		
City Ashaway	State RI	Zip 02804	City New Haven	State CT	Zip 06515
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative Marylou Brown					Date 3/12/25
Signature of Officer/Authorized Representative <i>Marylou Brown</i>					

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 272-2040

FILED
JUL 12 2025
BY **3706**
EE