



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. 000920013

2. Name of Corporation Friends of Jesse M. Smith 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 [click here](#).

NAICS Code

813219

4. Principal Office Address

No. and Street: 100 TINKHAM LANE

City or Town: HARRISVILLE State: RI Zip: 02830 Country: USA

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

FUNDRAISING FOR THE LIBRARY

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
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PRESIDENT	JACKI ZAHN	365 CAMP DIXIE RD PASCOAG, RI 02859 USA
VICE PRESIDENT	ANITA HURLEY-DIEZ	160 CENTRAL STREET HARRISVILLE, RI 02830 USA
DIRECTOR	MARY SKABA	1514 HILL ROAD PASCOAG, RI 02859 USA
DIRECTOR	DOROTHY KAROLYSHYN	201 EAST AVE HARRISVILLE, RI 02830 USA
DIRECTOR	LORRAINE PENNINGTON	434 COLWELL RD HARRISVILLE, RI 02830 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

JACQUELINE ZAHN 100 TINKHAM LANE BURRILLVILLE , RI 02830

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

Signed this 5 Day of July, 2025 at 2:20:15 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 JACQUELINE ZAHN
Signature of Authorized Person

Form No. 631
Revised 09/07

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