

**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.** 000031296**2. Name of Corporation** Rotary Club of Newport, Rhode Island**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: PO BOX 164City or Town: NEWPORTState: RIZip: 02840-6815Country: USA**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**A SERVICE ORGANIZATION**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	SUSAN CUNNINGHAM	32 ELM ST NEWPORT, RI 02840 USA
SECRETARY	CHRIS WILLIAMS	15 BLUEGRASS DR MIDDLETOWN, RI 02842 USA
VICE PRESIDENT	LAURENE SORENSEN	55 THIRD ST NEWPORT, RI 02840 USA
DIRECTOR	GORDON GIBSON	243 SANDY POINT AVE PORTSMOUTH, RI 02871 USA
DIRECTOR	JOANNE HOOPS	4 1/2 DRESSER ST NEWPORT, RI 02840 USA
DIRECTOR	SCOTT BARTLETT	4 MUMFORD AVE NEWPORT, RI 02840 USA
DIRECTOR	SUSAN CUNNINGHAM	32 ELM ST NEWPORT, RI 02840 USA
DIRECTOR	DEBBIE BAILEY	50 CLEARVIEW AVE PORTSMOUTH, RI 02871

**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**

JOSEPH LOGUE 103 HARRISON AVE. NEWPORT , RI 02840

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

**Signed this 11 Day of July, 2025 at 11:40:25 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 DEBORAH L BAILEY  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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