



RI SOS Filing Number: 202577107290 Date: 7/14/2025 4:00:00 PM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

FILED

Annual Report for the year:

Non-Profit Corporation

→ Filing period: J

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

JUL 14 2025
BY [Signature]
RECEIVED
DEPT. OF STATE
BUS. SVCS DIV
JUL 14 2025
5 JUL 20 12:31 PM

1. Entity ID Number 000090143		2. Exact name of the Corporation Rhode Island Marine Archaeology Project	
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Marine archaeology training and research	
4. NAICS Code 813990 - Other Similar Organiz			
6. Principal Office Address 215A State St		City Bristol	State RI Zip 02809
7. List ALL officers (names and addresses) ☐ Check the box to indicate an attachment			
President Name Vacant		Vice-President Name Shannon Nelson-Maney	
Street Address		Street Address 18 Lamplighter Dr.	
City	State	Zip	City Shrewsbury State MA Zip 01545
Secretary Name Sheila Kramer		Treasurer Name Carol Hottenrott	
Street Address 161 Lansdowne Rd.		Street Address 9 Brooks Ave	
City Warwick	State RI	Zip 02888	City Newport State RI Zip 02840
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. ☒ Check the box to indicate an attachment			
Director Name Steve Bastien		Director Name William Burns	
Street Address 47 Devonshore Dr.		Street Address 1220 Terra Nova Blvd	
City Waterford	State CT	Zip 06385	City Pacifica State CA Zip 94044
Director Name John Cassese		Director Name Greg DeAscentis	
Street Address 200 Boulder Way		Street Address 37 Elmwood Dr.	
City East Greenwich	State RI	Zip 02818	City Middletown State RI Zip 02842
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. 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.			
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.			
Name of Officer/Authorized Representative Sheila Kramer			Date 06/23/25
Signature of Officer/Authorized Representative <i>Sheila Kramer</i>			SIGN DOCUMENT HERE

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FORM 631 - Revised: 06/2017

Additional Board Members - 2024
Rhode Island Marine Archaeology Project
000090143

Debby Dwyer
53 County Rd.
Barrington, RI 02806

Joy Elvin
641 Middle Road
Portsmouth, RI 02871

John Hoagland
4 Portside Drive
Mashpee, MA. 02649

Roger Hudson
254 Namquid Dr.
Warwick, RI 02888

Linda Jenkins
25 Rim Rock Rd
Tiverton, RI 02878

Kerry Lynch
6424 Corning Rd.
Cocoa, FL 32927

Peter Nulton
223 Condon Ave.
Pawtucket, RI 02861

Jeremy Wilmes
PO Box 50132
Jacksonville Beach, FL 32240

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JUL 14 2025

BY

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OK