



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. 000009755

2. Name of Corporation Rotary Club of Warren, Rhode Island, Incorporated

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

813990

4. Principal Office Address

No. and Street: 800 METACOM AVE

City or Town: BRISTOL

State: RI

Zip: 02809

Country: USA

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

NON PROFIT CIVIC ACTIVITIES

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	MARK SMILEY	500 METACOM AVENUE BRISTOL, RI 02809 USA
TREASURER	BARBARA MAY HOLMES BRACKETT	420 MIDDLE HIGHWAY BARRINGTON, RI 02806 USA
SECRETARY	MELISSA STEELE	91 MAIN ST APT 259 WARREN, RI 02885 USA
DIRECTOR	RAYMOND PARKER	2 VERO COURT BARRINGTON, RI 02806 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**

RAYMOND PARKER 2 VERO COURT BARRINGTON , RI 02806

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

Signed this 15 Day of September, 2025 at 1:45:40 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 BARBARA HOLMES BRACKETT
Signature of Authorized Person

Form No. 631
Revised 09/07

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