



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2022  
 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

**FILED**

**JAN 28 2022**

1. Entity ID Number <b>000026968</b>		2. Exact name of the Corporation <b>Island Cemetery Company</b>		BY <b>202208898470</b>	
3. State of Incorporation <b>Rhode Island</b>		5. Brief description of the character of business conducted in Rhode Island <b>Enacted through the General Assembly during the January Session 1848 for maintenance of cemetery.</b>			
4. NAICS Code <b>561730</b>					
6. Principal Office Address <b>30 Warner Street</b>		City <b>Newport</b>	State <b>RI</b>	Zip <b>02840</b>	
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Pamela Kelley</b>			Vice-President Name <b>Walter Reed</b>		
Street Address <b>20 Willow Street</b>			Street Address <b>56 Old Beach Road</b>		
City <b>Newport</b>	State <b>RI</b>	Zip <b>02840</b>	City <b>Newport</b>	State <b>RI</b>	Zip <b>02840</b>
Secretary Name <b>Kevin Kelley</b>			Treasurer Name <b>Frank Ray</b>		
Street Address <b>4 Elm Street</b>			Street Address <b>228 Spring Street</b>		
City <b>Newport</b>	State <b>RI</b>	Zip <b>02840</b>	City <b>Newport</b>	State <b>RI</b>	Zip <b>02840</b>
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Barbara Benson</b>			Director Name <b>Lisa Lewis</b>		
Street Address <b>53 Tilden Avenue</b>			Street Address <b>22 Bridge Street</b>		
City <b>Newport</b>	State <b>RI</b>	Zip <b>02840</b>	City <b>Newport</b>	State <b>RI</b>	Zip <b>02840</b>
Director Name <b>Harry Eudenbach</b>			Director Name <b>Robert Vitello</b>		
Street Address <b>41 Palmer Street</b>			Street Address <b>17 Everett Street</b>		
City <b>Newport</b>	State <b>RI</b>	Zip <b>02840</b>	City <b>Newport</b>	State <b>RI</b>	Zip <b>02840</b>
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
<b>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.</b>					
<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 <b>Sharon L Hussey</b>				Date <b>01/24/2022</b>	
Signature of Officer/Authorized Representative <i>Sharon L Hussey</i>					