



**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: 2023

1. Corporate ID No. 000143629

2. Name of Corporation Clouds Hill Victorian House Museum

3. State of Incorporation

State: RI

ARTICLE III

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

712110

4. Principal Office Address

No. and Street: 4157 POST ROAD

P.O. BOX 522

City or Town: EAST GREENWICH

State: RI

Zip: 02818

Country: USA

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

TO OWN AND OPERATE A HISTORICAL VICTORIAN HOME AS A MUSEUM FOR THE PUBLIC

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
SECRETARY	CHRISTINE E. CABRAL	4157 POST ROAD, PO BOX 522 EAST GREENWICH, RI 02818 USA
DIRECTOR	CHRISTINE E. CABRAL	4157 POST ROAD, P.O. BOX 522 EAST GREENWICH, RI 02818
PRESIDENT	ANNE D HOLST	4157 POST ROAD, P.O. BOX 522 EAST GREENWICH, RI 02818- USA
VICE PRESIDENT	WAYNE A. CABRAL	4157 POST ROAD, PO BOX 522 EAST GREENWICH, RI 02818 USA
DIRECTOR	CHERYL GLENNON	4157 POST ROAD, PO BOX 522 EAST GREENWICH, RI 02818 USA
DIRECTOR	ANNE DONOVAN	4157 POST ROAD, PO BOX 522 EAST GREENWICH, RI 02818 USA
DIRECTOR	ANNE D. HOLST	4157 POST ROAD, PO BOX 522 EAST GREENWICH, RI 02818 USA
DIRECTOR	BRADFORD PRESTON	PO BOX 522 EAST GREENWICH, RI 02818 USA
DIRECTOR	MARIE PETRARCA	PO BOX 522 EAST GREENWICH, RI 02818 USA
DIRECTOR	WAYNE A. CABRAL	4157 POST ROAD, PO BOX 522 EAST GREENWICH, RI 02818 USA
DIRECTOR	SUSAN SWANSON	PO BOX 522 EAST GREENWICH, RI 02818 USA
DIRECTOR	DAVID PICKERING	PO BOX 522 EAST GREENWICH, RI 02818 USA
DIRECTOR	PHILIP ALLEN	PO BOX 522 EAST GREENWICH, RI 02818 USA
DIRECTOR	ELLEN MARTIN	PO BOX 522 EAST GREENWICH, RI 02818 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**

ANNE D. HOLST 4157 POST ROAD P. O. BOX 522 EAST GREENWICH , RI 02818

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

Signed this 1 Day of April, 2023 at 1:07:05 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 CHRISTINE E. CABRAL
Signature of Authorized Person

Form No. 631
Revised 09/07

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