	State of Rhode Office of the Secreta		Fee: \$20.00	
Division Of Business Services				
148 W. River Street				
	Providence RI 029			
1830	(401) 222-30	40		
Non-Profit Corporation				
Annual Report Filing Period: February 1 - May	· 1			
In accordance with R.I.G.L. 7-6 annual report within the time pr penalty fee of \$25.00.			s	
ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024				
1. Corporate ID No. 000031125				
2. Name of Corporation <u>RHODE ISLAND STATE ELKS ASSOCIATION</u>				
3. State of Incorporation				
State: <u>RI</u>				
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 <u>click here.</u>				
NAICS Code				
<u>813211</u>				
4. Principal Office Address				
No. and Street: <u>1143 GREAT ROAD</u>				
City or Town: <u>LINCO</u>	LN State:	<u>RI</u> Zip: <u>02865</u>	Country: <u>USA</u>	
5. Brief Description of the Character of the Affairs Conducted in Rhode Island				
CHARITABLE AND FRATERNAL				
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		dress	
	First, Middle, Last, Suffix	Address, City or Town	a, State, Zip Code, Country	

PRESIDENT	ARTHUR JACQUES	1143 GREAT ROAD LINCOLN, RI 02865 USA
DIRECTOR	THOMAS KRAEMER	11 SOUNDVIEW DRIVE PAWCATUCK, CT 06379 USA
DIRECTOR	MARK EATON	1 ORMS STREET WARWICK, RI 02889 USA
DIRECTOR	RICHARD DEVAULT	14 ROOSEVELT DRIVE BRISTOL, RI 02809 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

RICH BACCUS 311 WINDRIDGE LANE BRISTOL, RI 02809

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 May, 2024 at 5:26:44 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 <u>RICK BACCUS</u>

Signature of Authorized Person

Form No. 631 Revised 09/07

© 2007 - 2024 State of Rhode Island All Rights Reserved