



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2615  
401.222.3040

**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003**

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 \* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK  
\* 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.

1. Corporate ID No. 000113720		2. Name of Corporation Arts Alive		
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address 194 Oxford St.		City Providence
				Zip 02905
5. Foreign corporation. Enter principal office address			City	State
				Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island Promoting performing arts in RI				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Marc Viera			Vice President Name Laurine Ryan	
Street Address PO Box 40822			Street Address 370 Waterman St.	
City Providence	State RI	Zip 02940	City East Providence	State RI
Secretary Name Heather Ahern			Treasurer Name David Moreira	
Street Address 95 Empire St			Street Address 1041 Adams St	
City Providence	State RI	Zip 02903	City Dorchester	State MA
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23				
Director Name Marc Viera			Director Name Laurine Ryan	
Street Address PO Box 40822			Street Address 370 Waterman St	
City Providence	State RI	Zip 02940	City East Providence	State RI
Director Name Heather Ahern			Director Name David Moreira	
Street Address 95 Empire St			Street Address 1041 Adams St.	
City Providence	State RI	Zip 02903	City Dorchester	State MA
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78				
Agent Name Drew P. Kaplan			Address One Park Row, Suite 300	
Address			City Providence	Zip 02903

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date **FILED**

Check No. **MAR 21 2008**

By: **853412 1:17**

FOR SECRETARY OF STATE USE ONLY

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.

**Eva Marie Pacheco-Barney** 3/1/08  
Signature of Officer Date

**Eva Marie Pacheco-Barney**  
Print or Type Name of Officer

**President, current**  
Title of Officer