

A. Ralph Mollis, Secretary of State Corporations Division

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

2008 Providence, RI 02904-2615

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. 43 856			THEATRE E	NSEMBO	E, INC	
3. State of Incorporation	4. Corporate address in Ro	bode Island - Street Address	7. 7.6 3.61	Pauticket	D2860	
RI		12 IN ST	SUTTÉ 201	TOWN KEL	70	
5. Foreign corporation. Enter principal office address			Cu)	Mare	c.ip	
6. Brief Description of the character of the affairs which are actually conducted in Rhode Islan			lnd	1		
Theatre ALTS EDUCATION AND PERFORMANCE COMPANY						
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS						
President Name			Vice President Name			
JAMISON SCHIFF			Katherine	SCHOIL		
Street Address 34 CINCOLN AUE			20 Waltham STREET			
BACKINGTON	RI	02806	PAWRICKET	State (ZI	^{Zip} О 286. С	
Secretary Name BENH DALE Y			Treasurer Name TORI CURRIER			
Street Address 143 IVY STREET			Street Address Magnolia STREET			
PROJIDENCE	State R L	02906	CRANSION	State C	⁷ / ₀ 2920	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS						
THE NUMBER OF DIRECTO	RS OF A DOMESTIC	G (RHODE ISLAND) C	ORPORATION <u>SHALL NOT I</u>	BE LESS THAN THREE	(3). R.I.G.L. 7-6-23	
Director Name			Director Name			
DORE LEVY			DIANE ISENBORG			
39 PRESIDENT AVE			42 EAMES STREET			
PROVIDENCE	State RL	02906	PROJECT	State T	02906	
Director Name			Director Name TVOY GILLIS			
Street Address 15 UNIVERSITY AUG			Street Address 340 Cole Aue			
PROUDENCE 9. REGISTERED AGENT IN I	State CL	02906	PROULDENCE	State 12 I	02906	
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78						
This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee						

File Date	FILED	
Check No.	SEP 3 0 2008	2_j
Ву:	N 203/9 4 2073	ン: -
	FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that report, including any accompanying schedules and	
statements contained herein and true and correct.	9/25/08
Signature of Officer Jamieson Schiff	Date
Print or Type Name of Officer	
Title of Officer	Form 631 Rev. 09/17

Additional Members of the

ALL CHILDREN'S THEATRE BOARD OF DIRECTORS 2008-2009

Nicole Mariani 95 Mathewson St. # 306 Providence RI 02903

Wrenn Goodrum
Artistic/Executive Director
7 Wendy Drive
Bristol, RI 02809

Leslie Friedman 13 Charlesfield Street Providence, RI 02906

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