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 2009

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.	2. Name of Corporation		
140876	SHIFTING VISIONS FILMSEDUCATION PROJECT		
3. State of Incorporation	4. Corporate address in Rhode Island - Street Address	City	Zip
	780 RESERVOIR AVE SUITE 113	CRANSTON	02910
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

7. NAMES AND ADDRESSES OF THE OFFICERS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name	Street Address	City	State	Zip
ALEXIA KOSMIDER	41 STADDEN ST	PROVIDENCE	RI	02907

Vice President Name	Street Address	City	State	Zip
DEB MONUTEAUX	41 STADDEN ST	PROVIDENCE	RI	02910

Secretary Name	Street Address	City	State	Zip
SCOTT MONUTEAUX	4J MILCREEK ST	EAST GREENBUSH	NY	12061

Treasurer Name	Street Address	City	State	Zip
GORDON TAYLOR	14 KIPLING ST	PROVIDENCE	RI	02907

8. NAMES AND ADDRESSES OF THE DIRECTORS: ***("X" BOX FOR ATTACHMENT)*** ☐ **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	Street Address	City	State	Zip
JANA KOSMIDER	29504 SHELBOURNE ST	PERRYSBURG	OH	43551

Director Name	Street Address	City	State	Zip
JANE BERARD	847 HALIFAX DR	WARWICK	RI	02886

Director Name	Street Address	City	State	Zip
MARIANNE MESSINA	6 TOWNE ST	CRANSTON	R.I	02920

Director Name	Street Address	City	State	Zip

9. REGISTERED AGENT IN RHODE ISLAND

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

[redacted] [redacted]

FILED

File Date JUN 04 2009

Check No. By 2858

By:

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.

Alexia Kosmider 5/20/09
Signature of Officer *Date*

ALEXIA KOSMIDER
Print or Type Name of Officer

PRESIDENT
Title of Officer

[redacted]

Form 631 Rev. 09/17