



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

Fee: \$20.00

Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615
Telephone: (401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: June 1 - June 30

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: 2009

1. Corporate ID No. 000087881

2. Name of Corporation CRANSTON COMMUNITY THEATRE

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 2265 CRANSTON STREET

City or Town: CRANSTON

State: RI Zip: 02920 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

THE OBJECTIVE OF THIS COMPANY IS TO PROVIDE A VEHICLE FOR THE
DEVELOPMENT OF THE THEATRICAL TALENTS AND INTERESTS WITHIN THE
CRANSTON COMMUNITY.

7. Names and Addresses of the Officers and Directors:

*All officers and directors must be listed. If officers and/or directors have been elected, the title **Incorporator** is no longer applicable; please delete*

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	BERTHOLD S. SILVERBERG	2265 CRANSTON ST. CRANSTON, RI 02920-3810 USA
PRESIDENT	NANCY VITULLI	196 KNOLLWOOD AVENUE CRANSTON, RI 02910 USA
DIRECTOR	AMY OLSON	65 BROOKFIELD DRIVE CRANSTON, RI 02920 USA
DIRECTOR	BARBARA BIANCO	16 ROLAND AVE. CRANSTON, RI 02920 USA
DIRECTOR	LAUREA OSBORNE	18 PATRICIA DR. NORTH PROVIDENCE, RI 02904 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

BERT SILVERBERG 2265 CRANSTON STREET CRANSTON , RI 02920-

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

Signed this 30 Day of June, 2009 at 1:13:53 PM. *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 corporation, 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 BERTHOLD S. SILVERBERG
Signature of Officer of the Corporation

☐ President or ☐ Vice President or ☐ Secretary or ☐ Assistant Secretary or

☒ Treasurer or ☐ Receiver or ☐ Trustee (check one)

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.

Form No. 631
Revised 09/07

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