

**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

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**Non-Profit Corporation
Annual Report**

Filing Period: June 1 - June 30



Help with this form

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. 000029094

2. Name of Corporation Volunteers in Newport Education

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 15 WICKHAM ROAD

City or Town: NEWPORT

State: RI Zip: 02840

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

A VOLUNTEER TEACHER-GUIDED SERVICE TO MEET THE SPECIAL NEEDS OF INDIVIDUAL STUDENTS, TUTORING 1ON 1, IN SMALL GROUPS, SPECIALIZING IN EDUCATIONAL INCENTIVE PROGRAMS, K THROUGH 12.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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

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NOV 17 2009

By 1458

7-6-23

Delete	Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
☐	PRESIDENT	RAYMOND PICOZZI	129 KAY STREET NEWPORT, RI 02840 USA
☐	DIRECTOR	KERRY KALINOWSKI	9 KILBURN COURT NEWPORT, RI 02840 USA
☐	Vice president	Jaylore Cody Mrs.	23 Burdick Ave. Newport, RI 02840 USA
☐	Secretary	Sandra Flowers Ms.	16 Keeher Ave. Newport, RI 02840 USA
☐	Treasurer	Timothy Dyl	41 East Bowery St. Newport, RI 02840 USA
☐	Funding Dir.	Roberta Marie Emerson	41 East Bowery St. Newport, RI 02840 USA
☐	Board Member	Sheila DeAscentis	388 Broadway Newport, RI 02840 USA
☐	Board Member	Collette Bernard	485 Thames St. Newport, RI 02840 USA
☐	Board Member	Kathy Bronson	286 Boulevard Middletown, RI 02842 USA
☐	Board Member	Charles Roberts	35 Houston Ave. Newport, RI 02840 USA
☐	Historical Consultant	Lorna R. Lewis	36 Ayrault St. Newport, RI 02840 USA

Select From Below  Title:

First Name:

Middle Name:

Last Name:

Suffix:

Address:

City:

State:

Zip:

Country:

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

STEPHEN A. HAIRE, ESQ. AQUIDNECK CORPORATE PARK 97 JOHN CLARKE ROAD
MIDDLETOWN, RI 02842-

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

Filer's Contact Information

(Enter a contact name, mailing address and email.)

Contact Name: Roberta M. Emerson

Business Name:

No. and Street: 41 East Bowery St.

Principal Office 

City or Town: NEWPORT

State: RI

Zip: 02840

Country: USA

Contact Phone:

ext:

Contact Email:

FILED

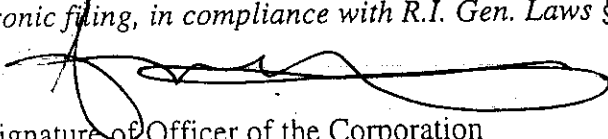
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By 20094

Please provide an email address to receive an expedited response from the Corporations Division if the filing is rejected for any reason. If no email address is provided, correspondence from the Division will be sent by mail.

Signed this 15 Day of May, 2009 at 2:35:43 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


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.

By selecting ACCEPT you hereby acknowledge that this electronic document is submitted in compliance with R.I. Gen. Laws § 7-6. You hereby agree that any legal issues or causes of action arising from the submission of this

☒ Accept

☐ Decline

[Click HERE to Submit This Information](#)

Form No. 631
Revised 09/07

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