



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov/business

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **2012**

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 114121		2. Exact name of the Corporation Providence Festival for New Latin American Cinema (aka, Providence Latin American Film Festival)			
3. State of Incorporation RI		4. Brief description of the character of business conducted in Rhode Island Showcase top art films from Latin America, Spain, Portugal and USA Latino filmmakers to audiences in order to foster understanding of the Latino experience.			
5. Principal office address 151 Broadway, Suite 200		City Providence	State RI	Zip 02903	
President Name Michael Doyle		Vice-President Name Tony Houston			
Street Address 123 Dyer Street, Suite 3B		Street Address 108 Fort Avenue			
City Providence	State RI	Zip 02906	City Cranston	State RI	Zip 02905
Secretary Name Analia Alcolea		Treasurer Name Mary LaMarca			
Street Address 138 Penn Street		Street Address 150 Mount Vernon Blvd.			
City Providence	State RI	Zip 02905	City Pawtucket	State RI	Zip 02861
7. LIST ALL DIRECTORS (NAME AND ADDRESS). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS (SEE SECTION 15-1-1.1(b)(1)). <input checked="" type="checkbox"/>					
Director Name Tony Aguilar		Director Name Michael Doyle			
Street Address 151 Broadway, Suite 200		Street Address 123 Dyer Street, Suite 3B			
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02905
Director Name Tony Houston		Director Name Analia Alcolea			
Street Address 108 Fort Avenue		Street Address 138 Penn Street			
City Cranston	State RI	Zip 02905	City Providence	State RI	Zip 02905
8. REGISTERED AGENT IN RHODE ISLAND This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

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

FILED
 SEP 13 2013
 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.

FILED 155

09/12/13

Signature of Officer _____ Date _____

SEP 13 2013

MARY ANN LAMARCA, PhD - 1
 Print or Type Name of Officer

BY D-205793 Board Member

Title of Officer