



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

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(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: 2014

1. Corporate ID No. 000485494

2. Name of Corporation Parents Helping Students Organization

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 120 EDUCATION LANE

City or Town: PORTSMOUTH

State: RI Zip: 02871 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

TO HELP PORTSMOUTH HIGH SCHOOL STUDENTS ACHIEVE THEIR GOALS IN A SAFE AND SUPPORTIVE ENVIRONMENT. WE HOLD BI-MONTHLY MEETINGS TO FACILITATE INVOLVEMENT BY AND COMMUNICATION AMONG MEMBERS OF THE HIGH SCHOOL COMMUNITY. WE WORK ON MANY IMPORTANT ISSUES INCLUDING PREVENTION OF TEENAGE SUBSTANCE ABUSE. WE ALSO ORGANIZE AND RUN: THE BOOK AWARDS PROGRAM, SENIOR PROJECT SUPPORT, FRESHMEN WELCOME NIGHT, THE COLLEGE FORUM NIGHT, THE STUDENT ACTIVITY BOOK, TEACHER APPRECIATION BREAKFAST AND THE INTERNATIONAL VOLLEYBALL DINNER.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	LISA M CAFFERTY	73 SLOOP DRIVE PORTSMOUTH, RI 02871 USA
TREASURER	LISA M CAFFERTY	73 SLOOP DRIVE PORTSMOUTH, RI 02871 USA
DIRECTOR	ELIZABETH PAOLERO	37 FERREIRA TERRACE PORTSMOUTH, RI 02871 USA
DIRECTOR	KAREN MARSHALL	1746 WEST MAIN ROAD PORTSMOUTH, RI 02871 USA
DIRECTOR	THEMMI EVANGELATOS	236 HILLTOP DRIVE PORTSMOUTH, RI 02871 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**

LISA CAFFERTY 120 EDUCATION LANE PORTSMOUTH , RI 02871

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

Signed this 14 Day of May, 2014 at 10:52:44 AM by the authorized person. *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 company, 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 LISA CAFFERTY
Signature of Authorized Person

Form No. 631
Revised 09/07