



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

**Foreign Non-Profit  
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.** 000315837

**2. Name of Corporation** Arts Are Essential, Inc.

**3. State of Incorporation**

State: MA

**4. Corporate Address in Rhode Island**

No. and Street: CT CORP

450 VETERAN'S MEMORIAL SUITE 7A

City or Town: EAST PROVIDENCE

State: RI Zip: 02914 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street: 144 SCHOOL ST.

City or Town: ACTON State: MA Zip: 01720 Country: USA

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

TO COLLABORATE WITH EDUCATORS AND ARTISTS TO BRING ART EXPERIENCES TO STUDENTS THAT ENRICH AND EDUCATE

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed.**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JEAN BUTLER	144 SCHOOL STREET ACTON, MA 01720 USA
TREASURER	KATHY SAUNDERS MS	8 FREEDOM FARM RD. ACTON, MA 01720 USA
CLERK	HOLLY STUMPF MS	21 LILLIAN RD LEXINGTON, MA 02420 USA

BOARD CHAIR	LIZ MACDONALD MS	127 WALTHAM ST. MAYNARD, MA 01754 USA
DIRECTOR	TINA BLOOM MS	665 PHEASANT HILL ACTON, MA 01718 USA
DIRECTOR	ROSIE LATTO MS	4 MOHEGAN RD. ACTON, MA 01720 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**

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST  
PROVIDENCE , RI 02914

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

**Signed this 27 Day of May, 2014 at 6:47:47 PM 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 JEAN BUTLER  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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