



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. 000030841

2. Name of Corporation Rhode Island College Cooperative Preschool

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 600 MT. PLEASANT AVENUE

City or Town: PROVIDENCE

State: RI Zip: 02908 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 DAYCARE

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	KATHERINE GARCIA	935 PONTIAC AVE APT 64 CRANSTON, RI 02920 USA
SECRETARY	JONATHAN COLLARD	172 DAGGER AVE PAWTUCKET , RI 02861 USA
PRESIDENT	KATIE SWINBURNE	51 NORTH COVE CIRCLE

		NORTH KINGSTOWN , RI 02852 USA
VICE PRESIDENT	KAITLIN FLATLEY	613 PARK STREET N. DEIGHTON , MA 02764 USA
DIRECTOR	CAROLYN SHIELDS	454 GREENVILLE AVE JOHNSTON, RI 02919 USA
DIRECTOR	ALAN SALEMI	203 RAILROAD AVE MANVILLE , RI 02838 USA
DIRECTOR	EMILY COOK	240 5TH STREET PROVIDENCE, RI 02906 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

STUDENT COMMUNITY GOVT. RHODE ISLAND COLLEGE 600 MOUNT PLEASANT AVENUE
PROVIDENCE , RI 02908

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

Signed this 1 Day of June, 2014 at 2:59:49 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 CAROLYN SHIELDS
Signature of Authorized Person

Form No. 631
Revised 09/07

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