

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

2014

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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.	2. Exact nar	2. Exact name of the Corporation 2nd Story Theatre				
30980	2nd Stor					
3. State of Incorporation	Brief description of the character of business conducted in Rhode Island					
Rhode Island	Theatre a	and acting studio	•			
5. Principal office address			City	State	Zip	
28 Market Street			Warren	RI	02885	
				and the second s	The state of the s	
President Name			Vice-President Name			
Edward Shea						
Street Address			Street Address			
230 Butler Avenue						
City	State	Zip	City	State	Zip	
Providence	RI	02906				
Secretary Name			Treasurer Name			
Rae Mancini Castigleigo			Lynne Collinson			
Street Address			Street Address			
129 Shaw Avenue			15 River Street			
City	State	Zip	City	State	Zip	
Cranston	RI	02905	Cranston	RI	02905	
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Director Name			Director Name			
Edward Shea			Paula Faber			
Street Address			Street Address			
230 Butler Avenue			150 Stone Ridge Drive			
City	State	Zip	City	State	Zip	
Providence	RI	02903	East Greenwich	RI	02818	
Director Name			Director Name			
Lynne Collinson			Rae Mancini Castigleig	30		
Street Address			Street Address			
15 River Street	· · · · · · · · · · · · · · · · · · ·		129 Shaw Avenue			
City	State	Zip	City	State	Zip	
Cranston	RI	02905	Cranston	RI	02905	
10 A	75.9					
This information is current	tly of record in th	e Office of the Secre	tary of State. Changes require filing	Form 641.		
This report must be signed b	v either the Presid	lent, Vice-President, S	ecretary, Assistant Secretary, Treasure	er, duly Authorized	Representative Receive	

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

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this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Lynne Collinson, Treasurer

Print or Type Name of Officer or Authorized Representative

Signature of Officer or Authorized Representative

Under penalty of perjury, I declare and affirm that I have examined

Form No. 631 Revised: 04/2014



2014 Board of Directors - 2nd Story Theatre

Ed Shea, Artistic Director, Chairman, Ex Officio 230 Butler Avenue, #5, Providence, RI 02906

Lynne Collinson, Executive Director, Ex Officio 15 River Street, Cranston, RI 02905

Rae Mancini Castigliego, Secretary 129 Shaw Avenue, Cranston, RI 02905

John Michael Richardson 30 Fairview Avenue, West Warwick, RI 02893

Paula Faber 150 Stone Ridge Drive, East Greenwich, RI 02818

Rhoda Flaxman, PhD 50 Park Row West #904, Providence, RI 02903

Joan Batting 375 Washington Road, Barrington, RI 02806

Eileen Warburton, PhD 150 Eustis Avenue, Newport, RI 02840

Margaret Melozzi 3581 Main Road, Tiverton, RI 02878

Wolfgang Knoess 155 Touisset Road, Warren, RI 02885

Brandt Heckert 26 State Street, Warren, RI 02885

Thomas Roberts 254 Norwood Avenue, Cranston, RI 02905

Ara Boghigian 103 Belvedere Drive, Cranston, RI 02920

Gretchen Dow Simpson 117 Everett Avenue, Providence, RI 02906 FILED

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