



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

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014

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. <u>512026</u>		2. Exact name of the Corporation <u>Center for the Arts and Culture of the Americas - Centro de Arte y Cultura de las Americas</u>	
3. State of Incorporation <u>RI</u>		4. Brief description of the character of business conducted in Rhode Island <u>Dance group</u>	
5. Principal office address <u>64 Norfolk St.</u>		City <u>Cranston</u>	State <u>RI</u>
		Zip <u>02910</u>	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
President Name <u>Lidia Olgado</u>		Vice-President Name <u>Graciela M. Acvedo</u>	
Street Address <u>64 Norfolk St</u>		Street Address <u>136 Volturmo St.</u>	
City <u>Cranston</u>	State <u>RI</u>	City <u>N. Providence</u>	State <u>RI</u>
Zip <u>02910</u>		Zip <u>02904</u>	
Secretary Name <u>Graciela M. Acvedo</u>		Treasurer Name <u>Patricia Castille</u>	
Street Address <u>136 Volturmo St</u>		Street Address <u>28 Niggins St</u>	
City <u>N. Prov</u>	State <u>RI</u>	City <u>Providence</u>	State <u>RI</u>
Zip <u>02904</u>		Zip <u>02903</u>	
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
Director Name <u>Lidia Olgado</u>		Director Name <u>Graciela M. Acvedo</u>	
Street Address <u>64 Norfolk St.</u>		Street Address <u>136 Volturmo St.</u>	
City <u>Cranston</u>	State <u>RI.</u>	City <u>N. Prov</u>	State <u>RI.</u>
Zip <u>02910</u>		Zip <u>02904</u>	
Director Name <u>Patricia Castille</u>		Director Name <u>"None"</u>	
Street Address <u>28 Niggins St.</u>		Street Address	
City <u>Providence</u>	State <u>RI</u>	City	State
Zip <u>02903</u>		Zip	
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, duly Authorized Representative, Receiver or Trustee

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED

JUL 29 2014

12-30

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.

Signature of Officer or Authorized Representative Graciela M. Acvedo Date 7.21.14

Print or Type Name of Officer or Authorized Representative Graciela M. Acvedo - Vice President