



**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 -</u> <u>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 Volturno St.</u>	
City <u>Cranston</u>	State <u>RI</u>	City <u>N. Providence</u>	State <u>RI</u> Zip <u>02904</u>
Secretary Name <u>Graciela M. Acvedo</u>		Treasurer Name <u>Patricia Castille</u>	
Street Address <u>136 Volturno St</u>		Street Address <u>28 Higgins St</u>	
City <u>N. Prov</u>	State <u>RI</u>	City <u>Providence</u>	State <u>RI</u> Zip <u>02903</u>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS <u>MUST</u> 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 Volturno St.</u>	
City <u>Cranston</u>	State <u>RI</u>	City <u>N. Prov</u>	State <u>RI</u> Zip <u>02904</u>
Director Name <u>Patricia Castille</u>		Director Name <u>"None"</u>	
Street Address <u>28 Higgins St.</u>		Street Address	
City <u>Providence</u>	State <u>RI</u>	City	State 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 7.21.14  
 Date

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