



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: 2016

1. Corporate ID No. 000502107

2. Name of Corporation Hope Highlands School Parent Teacher Organization, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 300 HOPE ROAD

City or Town: CRANSTON

State: RI

Zip: 02921

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

TO SUPPORT THE EDUCATION OF CHILDREN AT HOPE HIGHLANDS ELEMENTARY SCHOOL BY FOSTERING RELATIONSHIPS BETWEEN THE SCHOOL, PARENTS AND TEACHERS.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	TIMOTHY REICHARDT	48 LAUREN CT. CRANSTON, RI 02921 USA
SECRETARY	KIM RANONE	10 OCEAN VIEW DR

		CRANSTON, RI 02921 USA
SECRETARY	KARINA ROSSI-TOOLE	38 CANONCHET TRAIL CRANSTON, RI 02921 USA
DIRECTOR	ROXANNE GUSTAFSON	5 WAKE ROBIN RD., UNIT 2205 LINCOLN, RI 02865 USA
DIRECTOR	GINA HARWOOD	595 WILBUR AVE CRANSTON, RI 02921 USA
DIRECTOR	LORILYN HALL	51 LAUREN COURT CRANSTON, RI 02921 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

KAREN DIFAZIO 300 HOPE ROAD CRANSTON , RI 02921

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

Signed this 13 Day of June, 2016 at 8:57:21 AM 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 LORILYN HALL
Signature of Authorized Person

Form No. 631
Revised 09/07

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