



**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.** 000485494

**2. Name of Corporation** Parents Helping Students Organization

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 120 EDUCATION LANE

City or Town: PORTSMOUTH

State: RI Zip: 02871 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 HELP PORTSMOUTH HIGH SCHOOL STUDENTS ACHIEVE THEIR GOALS IN A SAFE AND SUPPORTIVE ENVIRONMENT. WE HOLD BI-MONTHLY MEETINGS TO FACILITATE INVOLVEMENT BY AND COMMUNICATION AMONG MEMBERS OF THE HIGH SCHOOL COMMUNITY. WE WORK ON MANY IMPORTANT ISSUES INCLUDING PREVENTION OF TEENAGE SUBSTANCE ABUSE. WE ALSO ORGANIZE AND RUN: THE BOOK AWARDS PROGRAM, SENIOR PROJECT SUPPORT, FRESHMEN WELCOME NIGHT, THE COLLEGE FORUM NIGHT, THE STUDENT ACTIVITY BOOK, TEACHER APPRECIATION BREAKFAST AND THE INTERNATIONAL VOLLEYBALL DINNER.

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
TREASURER	LISA M CAFFERTY	73 SLOOP DRIVE PORTSMOUTH, RI 02871 USA
TREASURER	LISA M CAFFERTY	73 SLOOP DRIVE PORTSMOUTH, RI 02871 USA
DIRECTOR	KAREN MARSHALL	1746 WEST MAIN ROAD PORTSMOUTH, RI 02871 USA
DIRECTOR	THEMMI EVANGELATOS	236 HILLTOP DRIVE PORTSMOUTH, RI 02871 USA
DIRECTOR	PAIGE GOULART	26 STANTON ROAD PORTSMOUTH, RI 02871 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**

LISA CAFFERTY 120 EDUCATION LANE PORTSMOUTH , RI 02871

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

**Signed this 27 Day of June, 2016 at 3:30:27 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 LISA CAFFERTY  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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