



State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

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: 2016

Filing period: June 1 - June 30

Filing Fee: \$20.00 \*FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID Number		2. Exact name of the Corporation			
30742		The Young Peoples School for the Performing Arts, Inc.			
3. State of Incorporation		4. Brief description of the character of business conducted in Rhode Island			
RI		teaching life skills/self esteem to students gr. 4-12			
5. Principal Office Address		City	State	Zip	
23 Cone Dr.		West Warwick	RI	02893	
6. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name		Vice-President Name			
Diane Verdolotti		Stephen Lowe			
Street Address		Street Address			
23 Cone Dr		16 Fort Hill Rd			
City	State	Zip	City	State	Zip
West Warwick	RI	02893	Bristol	RI	02809
Secretary Name		Treasurer Name			
Daniel LARCAU		Diane Verdolotti			
Street Address		Street Address			
19 Padden Lane		23 Cone Dr			
City	State	Zip	City	State	Zip
Seekonk	MA	02771	West Warwick	RI	02893
7. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name		Director Name			
Diane Verdolotti		Nicole Allison			
Street Address		Street Address			
23 Cone Dr		19 Padden Lane			
City	State	Zip	City	State	Zip
West Warwick	RI	02893	Seekonk	MA	02771
Director Name		Director Name			
Monique LARCAU					
Street Address		Street Address			
19 Padden Lane					
City	State	Zip	City	State	Zip
Seekonk	MA	02771			
8. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>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.</b>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative				Date	
Diane Verdolotti				6/28/16	
Signature of Officer/Authorized Representative					
Diane Verdolotti SIGN DOCUMENT HERE					

FILED

JUN 30 2016

BY (091) A.A.