



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. 001658121

2. Name of Corporation Curtis Corner Middle School Parent Teacher Organization

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 301 CURTIS CORNER ROAD

City or Town: SOUTH KINGSTOWN

State: RI Zip: 02879 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

THE PURPOSE OF THE PTO IS TO ENHANCE AND SUPPORT THE EDUCATIONAL EXPERIENCE AT CCMS, TO DEVELOP A CLOSER CONNECTION BETWEEN SCHOOL AND HOME BY ENCOURAGING PARENT INVOLVEMENT, AND TO IMPROVE THE ENVIRONMENT AT CCMS THROUGH VOLUNTEER AND FINANCIAL SUPPORT.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address
PRESIDENT	CYNTHIA DOWGIALLO	30 RIDGEWOOD LANE WAKEFIELD, RI 02879 USA

TREASURER	LISA MELLER	75 MORaine COURT WAKEFIELD, RI 02879 USA
SECRETARY	KERRY MCCARTY	50 TABLE ROCK ROAD WAKEFIELD, RI 02879 USA
VICE PRESIDENT	NONE NONE	NONE NONE, RI 02879 USA
DIRECTOR	CYNTHIA DOWGIALLO	30 RIDGEWOOD LANE WAKEFIELD, RI 02879 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**

CYNTHIA DOWGIALLO 307 CURTIS CORNER ROAD WAKEFIELD , RI 02879

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

Signed this 8 Day of July, 2016 at 2:10:22 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 MELLER
Signature of Authorized Person

Form No. 631
Revised 09/07