



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.** 000143124

**2. Name of Corporation** Aurea

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 195 SESSIONS STREET

City or Town: PROVIDENCE

State: RI

Zip: 02906

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 INVESTIGATE AND INVIGORATE THE RELATIONSHIP BETWEEN MUSIC AND THE SPOKEN WORD

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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
PRESIDENT	RENA ABELES	555 LLOYD AVE. PROVIDENCE, RI 02906 USA
TREASURER	AMY M GOLDSTEIN	195 SESSIONS ST. PROVIDENCE, RI 02906 USA

SECRETARY	FRANCES TRAFTON	13 CONSTITUTION HILL PROVIDENCE, RI 02904 USA
DIRECTOR	BRENDA K GAYNOR	83 UNIVERSITY AVE #2 PROVIDENCE, RI 02906 USA
DIRECTOR	JORDAN VERNER	74 MOUNTAIN AVE. RIVERSIDE, RI 02915 USA
DIRECTOR	STEPHEN COON	81 PRESIDENT AVE. PROVIDENCE, RI 02906 USA
DIRECTOR	JILL BRODY	43 EAST ORCHARD AVE. PROVIDENCE, RI 02906 USA
DIRECTOR	PETER ALLEN	44 ORIOLE AVE. PROVIDENCE, RI 02906 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**

AMY M. GOLDSTEIN 195 SESSION STREET PROVIDENCE , RI 02906

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

*Signed this 22 Day of October, 2016 at 11:31:28 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 AMY M. GOLDSTEIN  
Signature of Authorized Person

Form No. 631  
Revised 09/07