



**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:** 2017

**1. Corporate ID No.** 000071768

**2. Name of Corporation** Providence's CityArts! for Youth, Inc.

**3. State of Incorporation**

State: RI

**ARTICLE III**

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

**4. Corporate Address in Rhode Island**

No. and Street: 891 BROAD STREET

PO BOX 27691

City or Town: PROVIDENCE

State: RI

Zip: 02907

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**

COMMUNITY-BASED PERFORMANCE/FINE ARTS ORGANIZATION.

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	EJ TURRISI	10 WEYBOSSET ST. SUITE 200 PROVIDENCE, RI 02903 USA
DIRECTOR	MIA THOMPSON	42 BACKMORE STREET EAST GREENWICH, RI 02818 USA
PRESIDENT	GARRY BLISS	528 NORTH MAIN STREET PROVIDENCE, RI 02904 USA
VICE PRESIDENT	ALEIDA ESTELA BENITEZ	45 MAXFIELD AVENUE EAST PROVIDENCE, RI 02914 USA
DIRECTOR	SARAH GANZ BLYTHE	2 COLLEGE STREET PROVIDENCE, RI 02903 USA
EXECUTIVE DIRECTOR	NANCY SAFIAN	229 EIGHTH STREET PROVIDENCE, RI 02906 USA
SECRETARY	AMY LEITKE	19 HARVARD STREET PAWTUCKET, RI 02860 USA
DIRECTOR	NURIA ALONSO GARCIA	PROVIDENCE COLLEGE PROVIDENCE, RI 02908 USA
DIRECTOR	BRIDGET NEWMAN	40 FOUNTAIN STREET PROVIDENCE, RI 02903 USA
DIRECTOR	MICHAEL DEMATTEO	291 BROAD STREET CUMBERLAND, RI 02864 USA
DIRECTOR	MARY WELSH MCBURNEY	ONE TURKS HEAD PLACE SUITE 550 PROVIDENCE, RI 02903 USA
DIRECTOR	CHRISTINA ALDERMAN	166 VALLEY ST #6A307 PROVIDENCE, RI 02909 USA
DIRECTOR	SUSAN DUNNINGTON	66 SUMMIT ST EAST PROVIDENCE, RI 02914 USA
DIRECTOR	KEVIN MURPHY	256 VARNUM DRIVE WARWICK, RI 02819 USA
DIRECTOR	AMY PETTINE	17 STARBROOK DRIVE BARRINGTON, RI 02806 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**

SISTER ANN KEEFE 891 BROAD STREET PROVIDENCE , RI 02907

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

**Signed this 1 Day of June, 2017 at 10:42:14 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 LUKE BROOKNER  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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