



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.** 000028682

**2. Name of Corporation** Providence Revolving Fund

**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

6

813920

**4. Corporate Address in Rhode Island**

No. and Street: 372 WEST FOUNTAIN STREET

City or Town: PROVIDENCE

State: RI Zip: 02903 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 IMPROVE THE URBAN ENVIRONMENT OF PROVIDENCE THROUGH LOW INTEREST  
LOANS

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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
PRESIDENT	KYLE A MACDONALD	175 BARTLETT AVENUE PROVIDENCE, RI 02905 USA
TREASURER	KEN MCGUNAGLE	21 MEETING ST PROVIDENCE, RI 02903 USA
SECRETARY	CHRISTINE WEST	3 CENTRAL STREET PROVIDENCE, RI 02907 USA
VICE PRESIDENT	PETER WALSH	44 WASHINGTON STREET PROVIDENE, RI 02903 USA
DIRECTOR	CHRIS MARSELLA	1 SMITH STREET PROVIDENCE, RI 02903 USA
DIRECTOR	TINA REGAN	190 HIGH STREET BRISTOL, RI 02909 USA
DIRECTOR	JAMES BARNES	2 COLLEGE STREET PROVIDENCE, RI 02903 USA
DIRECTOR	RON CANIGLIA	105 PENNSYLVANIA AVENUE, RI 02888-3017 USA
DIRECTOR	BARBARA SOKOLOFF	101A DYER STREET PROVIDENCE, RI 02903 USA
DIRECTOR	MARY L VALES	CITIZENS BANK -1 CITIZENS PLAZA PROVIDENCE, RI 02903 USA
DIRECTOR	VIRGINIA BRANCH	111 CHESTNUT STREET PROVIDENCE, RI 02903 USA
DIRECTOR	BRENT RUNYON	21 MEETING STREET PROVIDENCE, RI 02903 USA
DIRECTOR	ANTONIETTA FALCONI	138 MESSER STREET PROVIDENCE, RI 02909 USA
DIRECTOR	DREW KAPLAN	ONE PARK ROW SUITE 300 PROVIDENCE, RI 02903 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**

MICHAEL FITZPATRICK 372 WEST FOUNTAIN STREET PROVIDENCE , RI 02903

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

**Signed this 15 Day of June, 2017 at 10:49:18 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 PAMELA RICCI  
Signature of Authorized Person

Revised 09/07

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