



**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. 000473744

2. Name of Corporation Rhode Island League of Charter Schools

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

813319

4. Corporate Address in Rhode Island

No. and Street: 4 RICHMOND SQUARE, SUITE 300

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

OUR MISSION IS TO EXPAND THE ROLE OF CHARTERS IN RHODE ISLAND PUBLIC EDUCATION BY SERVING MEMBER SCHOOLS AND LEADING AN ENGAGED DISCORSE PROMOTING PUBLIC SCHOOL CHOICE.

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Incorporator is no longer applicable; please delete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	ROSE MARY GRANT	42 LEXINGTON AVENUE PROVIDENCE, RI 02907 USA
TREASURER	PAMELA MCCUE	150 WASHINGTON STREET PROVIDENCE, RI 02903 USA
SECRETARY	ANGELO GARCIA	361 COWDEN STREET CENTRAL FALLS, RI 02863 USA
VICE PRESIDENT	MICHAEL SKELDON	320 MAIN STREET WOONSOCKET, RI 02895 USA
DIRECTOR	NANCI DEROBIO	158 MESSER STREET PROVIDENCE, RI 02909 USA
DIRECTOR	LINDA PAOLILLO	850 STONY FORT ROAD SAUNDERSTOWN, RI 02874 USA
DIRECTOR	MARIO CIRILLO	130 BROADWAY PROVIDENCE, RI 02903 USA
DIRECTOR	WENDY RANDLE	459 PROMENADE STREET PROVIDENCE, RI 02908 USA
DIRECTOR	ROBERT PILKINGTON	135 WEYBOSSET STREET PROVIDENCE, RI 02903 USA
DIRECTOR	MEG O LEARY	21 LINCOLN AVENUE CENTRAL FALLS, RI 02863 USA
DIRECTOR	RUDOLPH MOSLEY	50 FILLMORE STREET PROVIDENCE, RI 02908 USA
DIRECTOR	CAROLYN SHEEHAN	334 PLEASANT STREET PAWTUCKET, RI 02860 USA
DIRECTOR	SARAH FRIEDMAN	21 LINCOLN AVENUE CENTRAL FALLS, RI 02863 USA
DIRECTOR	JOSHUA LAPLANTE	94 JOHN POTTER ROAD WEST GREENWICH, RI 02817 USA
DIRECTOR	BRANDEE LAPISKY	537 OLD NORTH ROAD KINGSTON, RI 02881 USA
DIRECTOR	JULIE NORA	334 PLEASANT STREET PAWTUCKET, RI 02860 USA
DIRECTOR	DENNIS CURRAN	4 SHARPE DRIVE CRANSTON, RI 02920 USA
DIRECTOR	TOBY SHEPHERD	133 DELAINE ST. PROVIDENCE, RI 02909 USA
DIRECTOR	KYLEEN CARPENTER	334 PLEASANT ST PAWTUCKET, RI 02860 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**

TIMOTHY GROVES FOUR RICHMOND SQUARE SUITE 300 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 29 Day of June, 2017 at 3:47:27 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 TIMOTHY J. GROVES
Signature of Authorized Person

Form No. 631
Revised 09/07

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