



**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.** 000998194

**2. Name of Corporation** Charlestown School PTO 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

6

611110

**4. Corporate Address in Rhode Island**

No. and Street: 363 CAROLINA BACK RD

City or Town: CHARLESTOWN

State: RI

Zip: 02813

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 SUPPORT THE EDUCATION OF CHILDREN AT CHARLESTOWN ELEMENTARY BY  
FOSTERING THE RELATIONSHIP BETWEEN THE SCHOOL PARENTS AND TEACHERS  
AND RELATED ACTIVITIES

**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**Incorporator is no longer applicable; please delete**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	CASSANDRA CHARETTE	548 KLONDIKE ROAD CHARLESTOWN, RI 02813 USA
TREASURER	MELISSA ENGLAND	100 NARROW LANE CHARLESTOWN, RI 02813 USA
SECRETARY	KIMBERLY KANE	363 CAROLINA BACK RD CHARLESTOWN, RI 02813 US
ASSISTANT SECRETARY	MARCY ALVES	10 DRIFTWOOD DRIVE CHARLESTOWN, RI 02813 US
CO-TREASURER	LORI ISKANDER	36 OLD SHANNOCK ROAD CHARLESTOWN, RI 02813 USA
VICE PRESIDENT	KAREN BELLNIER	144 BUCKEYE BROOK ROAD CHARLESTOWN, RI 02813 USA
DIRECTOR	ELIZABETH KOCAB	39 NARROW LANE CHARLESTOWN, RI 02813 USA
DIRECTOR	AMBER THOMAS	14 ACORN VALLEY WAY CHARLESTOWN, RI 02813 USA
DIRECTOR	BETHANY MACLEOD	511 CAROLINA BACK ROAD CHARLESTOWN, RI 02813 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**

MELISSA ENGLAND 363 CAROLINA BACK ROAD CHARLESTOWN , RI 02813

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

**Signed this 13 Day of July, 2017 at 5:36:32 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 MELISSA ENGLAND  
Signature of Authorized Person

Form No. 631  
Revised 09/07