



**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: 2018

1. Corporate ID No. 000080078

2. Name of Corporation Youth Pride, 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: 743 WESTMINSTER 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

THE ORGANIZATION'S MISSION IS TO PROVIDE SOCIAL, EDUCATIONAL AND EMOTIONAL SUPPORT TO GAY AND BISEXUAL YOUTH.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	LISA CARCIERI	67 DRYDEN AVENUE PAWTUCKET, RI 02860 USA
TREASURER	MARY BENVENUTO	29 LIBERTY HILL DR. BLACKSTONE, MA 01504 USA
SECRETARY	JENNIFER PORCELLI	82 HILLTOP DRIVE JOHNSTON, RI 02919 US
DIRECTOR	CHRISTOPHER BOTELHO	141 GROVE AVENUE EAST PROVIDENCE, RI 02914 US
DIRECTOR	TENEKA COOKE	743 WESTMINSTER STREET PROVIDENCE, RI 02903 US
DIRECTOR	BENJAMIN CHAPLIN	743 WESTMINSTER STREET PROVIDENCE, RI 02903 US
DIRECTOR	TIFFANY HOGAN	14 MOSHER DRIVE BARRINGTON, RI 02806 US
DIRECTOR	JEFFREY LAVALLEY	187 COUNTY STREET, 1ST FL ATTLEBORO, MA 02703 US
DIRECTOR	MICHELLE SAUNDERS	27 ARCADIA AVENUE RUMFORD, RI 02916 USA
DIRECTOR	AMANDA VALENTINO	20 BEACH ROAD BRISTOL, RI 02809 USA
DIRECTOR	JUSTIN HADDOCK	36 STATUE WAY PORTSMOUTH, RI 02871 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**

CHRISTOPHER R. LAUTH 743 WESTMINSTER 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 2 Day of May, 2018 at 3:50:08 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 ELANA ROSENBERG
Signature of Authorized Person

Form No. 631
Revised 09/07

