



**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. 000030841

2. Name of Corporation Rhode Island College Cooperative Preschool

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: 600 MT. PLEASANT AVENUE

City or Town: PROVIDENCE

State: RI Zip: 02908 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 30 WEST DR APT 1A

City or Town: PROVIDENCE State: RI Zip: 02904-2046 Country: UNI

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

A DAYCARE

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	ERICA TESSIER MS	17 ASCENSION MANVILLE, RI 02838 USA
TREASURER	ALYSON FOSTER MS	30 WALDEN WAY CRANSTON, RI 02921 USA
SECRETARY	LAUREN SLATER MRS	87 KENT DRIVE EAST GREENWICH, RI 02818 USA
ASSISTANT PRESIDENT	KATRINA CALDERON MS	30 WEST DR APT 1A PROVIDENCE, RI 02904-2046 USA
DIRECTOR	CAROLYN SHIELDS	454 GREENVILLE AVE JOHNSTON, RI 02919 USA
DIRECTOR	ALAN SALEMI	203 RAILROAD AVE MANVILLE, RI 02838 USA
DIRECTOR	REBECCA WINFIELD	4 CHURCH STREET GREEVILLLE, RI 02828 USA
DIRECTOR	BRIAN STEVENS	4 LANTERN LANE COVENTRY, RI 02816 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**

STUDENT COMMUNITY GOVT. RHODE ISLAND COLLEGE 600 MOUNT PLEASANT AVENUE
PROVIDENCE, RI 02908

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

Signed this 7 Day of May, 2018 at 1:22:25 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 CAROLYN SHIELDS
Signature of Authorized Person

Form No. 631
Revised 09/07