RI SOS Filing Number: 201869704850 Date: 6/15/2018 4:00:00 PM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2018 Non-Profit Corporation

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- → Filing period: June 1 June 30.
- → Filing Fee: \$20.00
- -> Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number	. Entity ID Number 2. Exact name of the Corporation							
30987	School One							
3. State of Incorporation	5. Brief description of the character of business conducted in Rhode Island							
Rhode Island	School One is an independent accredited high school.							
4. NAICS Code	1							
611110 - Elementary and Se	İ							
6. Principal Office Address			City	State	Zip			
220 University Avenue			Providence	RI	02906			
7. List ALL officers (names and ad	ldresses)				cate an attachment			
President Name Janet Krueger			Vice-President Name Karen Weavill					
Street Address 14 Heidi Road			Street Address 7 Wake Robin	Street Address 7 Wake Robin Road, Unit 312				
City Lincoln	State RI	Zip 02865	City Lincoln	State RI	Zip 02865			
Secretary Name Alison Townsend	<u> </u>		Treasurer Name Andrew deL	Treasurer Name Andrew deLabry				
Street Address 63 Alfred Drown R	oad		Street Address 19 Wetomach	Street Address 19 Wetomachick Avenue				
City Barrington	State RI	Zip 02806	City Westerly	State RI	Zip 02891			
8. List ALL directors (names and a	addresses). RI (Corporations MUST	list at least THREE directors.	Check the box to indi	cate an attachment			
Director Name Doug Boone			Director Name Ruth Feder	Director Name Ruth Feder				
Street Address 57 Lorimer Avenu	•		Street Address 69 Larch Road					
City Providence	State RI	^{Zip} 02906	City East Greenwich	State RI	Zip 02818			
Director Name Michael Fox		•	Director Name Karen Holler					
Street Address 98 Overhill Road			Street Address 19 Harvard Street					
City Providence	State RI	^{Zip} 02906	City Pawtucket	State RI	Zip 02860			
9. Registered Agent in Rhode Isla	nd. This informat	ion is currently of reco	ord in the Department of State. Chan	ges require filing Form 6	41.			
Under penalty of perjury, I decli- statements, and that all stateme				ccompanying sched	lules and			
This report must be signed by either the Pri	esident, Vice-Presid	ent, Secretary, Assistant	Secretary, Treasurer, duly Authorized Rep	presentative, Receiver or Tru	ustee.			
Name of Officer/Authorized Repre				Date				
Janet Krue	1er			6/12/	18			
Signature of Officer/Authorized Representative SIGN DOCUMENT HERE								
The Car								
MAIL TO:			rillu 4					

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov JUN 1 5 2018

FORM 631 - Revised: 11/2017

School One, 220 University Avenue, Providence, RI 02906 Board of Directors (continued)

Kellogg, David 162 Meeting Street Providence, RI 02906

McKenna, Lucy 68 7th Street East Providence, RI 02914

McDonald, Allison 3 Bellmare Road Coventry, RI 02816

Neri, Timi-Ann 96 Redland Avenue Rumford, RI 02916

O'Donnell, Michaela 72 Eighth Street Providence, RI 02906

Parr, David 652 Angell Street Providence, RI 02906

Skowron, Gail 46 Donald Potter Road West Greenwich, RI 02817

Stepney, Paul 85 Mollie Drive Cranston, RI 02921

Sullivan, Mari-ann 24 East Highland Avenue Barrington, RI 02860

Tyler, Clare 68 Columbia Avenue Cranston, RI 02905

Vale, Marshall 12 Twin Circle Drive Arlington, MA 02474 Van, Jim 111 Irving Avenue Providence, RI 02906

Vollaro, Camille 7 Alice Street Warren, RI 02885