

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2018
Non-Profit Corporation

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

-> Penalty: Additional \$25.00 fee if form is not filed by July 30.

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1. Entity ID Number	2. Exact name of the Corporation					
151857	Friends of the Music Mansion, Inc,					
3. State of Incorporation	Brief description of the character of business conducted in Rhode Island					
RI	To promote the public's interest in and appreciation of music, and to support the establishment of an institution for the instruction of art and music.					
4. NAICS Code	1					
812990						
6. Principal Office Address			City	State	Žip	
36 Fairview Avenue			Cranston	RI	02905	
7. List ALL officers (names and addresses) Check the box to indicate an attachment						
President Name Deborah Concannon			Vice-President Name Edward Markward			
Street Address 94 Olde Mill Lane			Street Address 11 Taft Avenue			
City North Kingston	State RI	Z ₁ p 02852	City North Providence	State RI	^{Zip} 02904	
Secretary Name Kirsten Volness			Treasurer Name Marian De Cesaris			
Street Address 14 Ogden Street #2			Street Address 36 Fairview Ave			
City Providence	State RI	^{Zip} 02906	City Cranston	State RI	Zip 02905	
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment						
Director Name Deborah Concannon			Director Name Edward Markward			
Street Address 94 Olde Mille Lane			Street Address 11 Taft Avenue			
City North Kingston	State RI	Zip 02852	City North Providence	State RI	^{Zip} 02904	
Director Name Kirsten Volness			Director Name Marian DeCesaris			
Street Address 14 Ogden Street #2			Street Address 36 Fairview Avenue			
City Providence	State Ri	Z ₁ p 02906	City Cranston	State RI	Zip 02905	
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.						
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.						
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.						
Name of Officer/Authorized Repres Marian DeCesaris	sentative			Date 7/28/18		
Signature of Officer/Authorized Representative						
Marien AD e Cesario SIGN DOCUMENT HERE						

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov BY 5164 2170

FORM 631 - Revised: 11/2017

Attachment A.

FRIENDS OF THE MUSIC MANSION, INC.: Additional Directors

James DeCesaris 36 Fairview Avenue Cranston, RI 02905

Robert Franzblau 33 Blueberry Lane Scituate, RI 02857

FILED

AUG 0 2 2018
BY 51142170