



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.

FILED

MAR 25 2019

BY 2043 DS

1. Entity ID Number <u>521723</u>		2. Exact name of the Corporation <u>Old County Road School PTA</u>	
3. State of Incorporation <u>RI</u>		5. Brief description of the character of business conducted in Rhode Island <u>To promote education and cultural programs to benefit the students of Old County Rd. School</u>	
4. NAICS Code <u>611110</u>			
6. Principal Office Address <u>200 Old County Road</u>		City <u>Smithfield</u>	State <u>RI</u>
		Zip <u>02917</u>	
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name <u>Todd Manni</u>		Vice-President Name <u>Jon Poyourou</u>	
Street Address <u>218 Old County Road</u>		Street Address <u>236 Old County Road</u>	
City <u>Smithfield</u>	State <u>RI</u>	City <u>Smithfield</u>	State <u>RI</u>
Zip <u>02917</u>		Zip <u>02917</u>	
Secretary Name <u>Kaice Kasberg</u>		Treasurer Name <u>Amy Ricketson</u>	
Street Address <u>5 Russell Lane</u>		Street Address <u>10 E. Prospect St.</u>	
City <u>Smithfield</u>	State <u>RI</u>	City <u>Smithfield</u>	State <u>RI</u>
Zip <u>02917</u>		Zip <u>02917</u>	
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>			
Director Name <u>Todd Manni</u>		Director Name <u>Jon Poyourou</u>	
Street Address <u>218 Old County Road</u>		Street Address <u>236 Old County Rd</u>	
City <u>Smithfield</u>	State <u>RI</u>	City <u>Smithfield</u>	State <u>RI</u>
Zip <u>02917</u>		Zip <u>02917</u>	
Director Name <u>Paul Barrett</u>		Director Name <u>Amy Ricketson</u>	
Street Address <u>200 Old County Rd</u>		Street Address <u>10 E. Prospect St.</u>	
City <u>Smithfield</u>	State <u>RI</u>	City <u>Smithfield</u>	State <u>RI</u>
Zip <u>02917</u>		Zip <u>02917</u>	
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 Representative <u>Amy Ricketson</u>			Date <u>2/13/2019</u>
Signature of Officer/Authorized Representative <u>Amy Ricketson</u>			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