



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

Annual Report for the year: 2019

STAMP

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.

1. Entity ID Number <u>849367</u>		2. Exact name of the Corporation <u>Southside Elementary Charter School</u>	
3. State of Incorporation <u>RI</u>		5. Brief description of the character of business conducted in Rhode Island <u>To operate a charter school in the State of Rhode Island.</u>	
4. NAICS Code <u>61116</u>			
6. Principal Office Address <u>135 Prairie Ave</u>		City <u>Providence</u>	State <u>RI</u>
		Zip <u>02905</u>	
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <u>Eileen Hayes</u>		Vice-President Name <u>Antoinette Gomes</u>	
Street Address <u>415 Friendship St</u>		Street Address <u>585 Mt. Pleasant Ave.</u>	
City <u>Providence</u>	State <u>RI</u>	City <u>Providence</u>	State <u>RI</u>
Zip <u>02907</u>		Zip <u>02908</u>	
Secretary Name <u>none</u>		Treasurer Name <u>Dan Corley</u>	
Street Address		Street Address <u>135 Prairie Ave.</u>	
City	State	City <u>Providence</u>	State <u>RI</u>
Zip		Zip <u>02905</u>	
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name <u>Madeline Burke</u>		Director Name <u>Chandra Dash</u>	
Street Address <u>97 Leah St.</u>		Street Address <u>153 Bayfield St.</u>	
City <u>Providence</u>	State <u>RI</u>	City <u>Providence</u>	State <u>RI</u>
Zip <u>02908</u>		Zip <u>02905</u>	
Director Name <u>Dr. Magdalene Andres</u>		Director Name <u>none</u>	
Street Address <u>13 Clinton Ave.</u>		Street Address	
City <u>Jamestown</u>	State <u>RI</u>	City	State
Zip <u>02835</u>		Zip	
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.			
<b>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.</b>			
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>Wendy Randle</u>			Date <u>4/4/19</u>
Signature of Officer/Authorized Representative <u>Wendy Randle</u>			

## MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

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SECRETARY OF STATE  
CORPORATIONS DIV  
APR 11 2019

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APR 08 2019

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