



**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: 2019

1. Corporate ID No. 001658833

2. Name of Corporation The Collaborative

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
453920

4. Corporate Address in Rhode Island

No. and Street: 498 MAIN STREET

City or Town: WARREN

State: RI

Zip: 02885

Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

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

THE ORGANIZATION IS EXCLUSIVELY ORGANIZED AS A NONPROFIT GROUP UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE, TO PROVIDE AN ENVIRONMENT FOR LOCAL ARTISTS THAT SUPPORTS, PROMOTES AND ENCOURAGES CREATIVITY AND INSPIRATION BY FACILITATING INCREASED EXPOSURE AND OPPORTUNITIES THROUGH WORK SPACE, EXHIBITION, AND WEB PRESENCE.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JERRY BLITEFIELD	9 KELLY ST WARREN, RI 02885 USA
TREASURER	PATRICIA SILVIA	5 RED FOX TRL SOMERSET, MA 02726 USA
SECRETARY	SIERRA BARTER	5 GRANDVIEW AVE WARREN, RI 02885 USA
DIRECTOR	ADAM TRACY	34 COOMER AVE WARREN, RI 02885 USA
DIRECTOR	JEFFREY DANIELIAN	3 ARTHUR AVE WARREN, RI 02885 USA
DIRECTOR	JERRY BLITEFIELD	9 KELLY ST WARREN, RI 02885 USA
DIRECTOR	SIERRA BARTER	5 GRANDVIEW AVE WARREN, RI 02885 USA
DIRECTOR	PATRICIA M SILVIA	5 RED FOX TRL SOMERSET, MA 02726 USA
DIRECTOR	URIAH DONNELLY	97 CHILD ST WARREN, RI 02885 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**

URIAH DONNELLY 97 CHILD ST WARREN , RI 02885

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

Signed this 20 Day of May, 2019 at 5:14:12 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 UD
Signature of Authorized Person

Form No. 631
Revised 09/07

