

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335

401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005 Filing Period: June 1 - June 30 Filing Fee: \$20.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) L. Corporate ID No. 2. Name of Corporation 82527 The JASPER Ballet 3. State of Incorporation 4. Corporate address in Rhode Island - Street Address **RHODE ISLAND** 5. Foreign corporation. Emer principal office address City 6. Brief Description of the character of the affairs which are actually conducted in Rhode Island TO ESTABLISH AND OPERATE A DANCE TROUPE FOR THE PURPOSE OF RAISING FUNDS. 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) [FILL IN SPACES BEFORE USING ATTACHMENTS Sired Address 06861 02864 Secretary Name Treasurer Name Street Address Street Address City Zip 02864 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23 Director Name Κα orrai Street Address City City 02019 Director Name Street Address City Zip 9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78 Agent Name Address **ARLENE G. GILBERT** Address Zip 21 TAFT ROAD **CUMBERLAND**

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

	82527))
File Date	6-3-05	
Check No.	116	
ву:	ow	
F	OR SECRETARY OF STATE USE ONLY	_

Under penalty of perjury, I declare and affirm that I report, including any accompanying schedules and sta	
statements contained herein are true and correct.	
Mash (Um	lo-E-05
Signature of Officer	Date
Cavolyn Ribeiro	
Print or Type Name of Officer	
Treasurer	
Title of Officer	



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335

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2004 NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR Filing Fee: \$20.00 Filing Period: June 1 - June 30 (FORM MUST BE TYPED OR PRINTED IN BIACK) 1. Corporate ID No. 2. Name of Corporation 82527 The JASPER Ballet 3. State of Incorporation 4. Corporate address in Rhode Island - Street Address 02864 Taf **RHODE ISLAND** 5. Foreign corporation. Enter principal office address 6. Brief Description of the character of the affairs which are actually conducted in Rhode Island TO ESTABLISH AND OPERATE A DANCE TROUPE FOR THE PURPOSE OF RAISING FUNDS. 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) [FILL IN SPACES BEFORE USING ATTACHMENTS President Nam Vice President Name Street Address Street Address City Zin Secretary Na Street Address Cuy City Zφ 02864 02864 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23 Director Name Director Name Street Address Zip Cin City 02864 02864 Street Address Sinvi Addre City Siaic 7.ip T 02852 9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78 Arent Name Address **ARLENE G. GILBERT** Address Zφ 21 TAFT ROAD **CUMBERLAND** 02864

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

* 8 2 5 2 7 *	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all
File Date 6 2104	Signature of Officer Date
By:	Print or Type Name of Officer
FOR SECRETARY OF STATE USE ONLY	Title of Officer Form 631 Rev. 04/04



Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

Form 631 Rev. 6/02

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR ______ 2003

Filing Period: June 1 -	-	Fee: \$20.00	·	•	
(FORM MUST BE TYPED OR 1. Corporate ID No.	2. Name of Corporal	ion		· · · · · · · · · · · · · · · · · · ·	
82527	The JASPER Ballet				
3. State of Incorporation		s in Rhode Island - Street Add	dress .	City	Zip
RHODE ISLAND		F+ RA	•	Combin	
5. Foreign corporation. Enter		<u></u> Q	City	State	Zip
6. Brief Description of the char. TO ESTABLISH AND O	• ••	are actually conducted in Rh OUPE FOR THE PURPO			
7. NAMES AND ADDRESS	ES OF THE OFFICE	RS ("X" BOX FOR ATTA	CHMENT) FILL IN SPA	CES BEFORE USING	ATTACHMENTS
President Name		· 	Vice President Name	:	
Lorraine	Purick	•	1 Ann Inar	12 Nor	mandia
Sircei Address	1		Street Address		
17 6-clb 134	hune		154 Bur		Unit 665
City (Siate	Zip	City	State 121	Zip
Secretary Name	<u>nl 1990</u>	102219	Treasurer Name	ma la	02564
17	Vout 2 ick		Carolyn	R. beir	1.
Street Address	7 4 65 1 65 16 96		Street Address	121 0011	
3, Relle	102 ST		as Sprin	no House	L n
City	State	Zip	City	State	Zip
Cumber buch	<u> K</u> .d	02864	Cinh	<u> </u>	C2166
8. NAMES AND ADDRESS					
,	ECTORS OF A DOME	STIC (RHODE ISLAND) CORPORATION SHALL	NOT BE LESS THAN	<u> THREE (3). R.I.G.L. 7-6-23 </u>
Director Name	<i>2</i> 5		Director Name		
Arlene	G-1/bard	·	13eucrly L	evitt ho	LV @ 15CO
Street Address	O		Street Address		
al Ta				: Mar Dr	100.
City	State	Zip	City	State	Zip
Director Name	<u> </u>	OZYLY	Director Name	KI KI	02852
Kathan	mosico		Director Name.		
Sircel Address	<u> </u>	<u></u>	Street Address		· · · · · · · · · · · · · · · · · · ·
Sc_Fising	r RA #	75			
City	State	Zip	City	State	Zip
i <u>Cimberk</u> -c	\ KeL	19126			
9. REGISTERED AGENT I	N RHODE ISLAND -	DO NOT ALTER - Chan	· · · · · · · · · · · · · · · · · · ·	n 641 - R.I.G.L. 7-6-13	/7:6-78
Agent Name			Address		
ARLENE G. GILBERT					······
Address			City	Z	üp
21 TAFT ROAD	,		CUMBERLAND	<u> </u>	02864
This report must be sign	ed in ink by either t	he President, Vice Pre	esident, Secretary, Assis	tant Secretary, Treas	surer, Receiver or Trustee
* 8	2 5 2 7		Under penalty of per this report, including	rjury, I declare and affirm 3 any accompanying sche	n that I have examined edules and statements.
			and that all statemen	its contained herein are tr	ue and correct.
File Date Le 2	5.03		Minle	Viliano	- lo-15:6.5
	//>~		Signature of Officer	<u> </u>	Date
Check No.	Check No. Print or Type Name of Officer				
B _v	de .	_	Print or Type Name o	J Officer	
FOR SECRETARY OF STAT	E USE ONLY		Tyle of Officer	1161-	Form 631 - Rev 6/00

Title of Officer

To be filed annually during the month of June

re company



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

Corporate ID Number DNP-82527	Annual Report for the year 2002
The name of the corporation is The JASPE	R Ballet
2. The state or other jurisdiction under the laws	of which it is incorporated is RHODE ISLAND
3. The address of the registered office of the c	orporation in this state is <u>21 (AF 한민구들</u> CUMBERLAND, RI 02864
and the name of its registered agent in this s	state at that address is ARLENE G. GILBERT
4. The character of the affairs which it is actual	ly conducting in Rhode Island, briefly stated, is to operate an
	purpose of fundraising to Support The troupe of A
incorporated is	
6. Corporate address in Rhode Island 2	+ Taft Pd
	mberland 22 ozsav
	fficers: (In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the land) corporation shall not be less than three (3).)
NAME OFFICE	ADDRESS
Arlene Gilbert Director	21 Taft Pd Cumberland RI
Beverly hevill harriso Director	146 Terle Mar dr N Kingston RT
Kallahu Mospai Director	80 Fisher Rd # 75 Comb. RT
Larraine Purich President	17 Labby Lane Bellingham MA
Any Marie Normand Vice-President	163 Bear Hill Rd Cumberland RI
Mary Polovatzick Secretary	31 Bellevue St Cumberland PI
Carolyn Ribeiro Treasurer	25 Spring House La Cumberland RI
Dated: 6-3-02	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.
* 3 2 5 2 7 *	The Jo-Sper Ballet
FOR SECRETARY OF STATE USE ONLY	By lawly Ribers
File Date:	Title Thereezes
Check No.:	(Report must be signed by an officer) Form No. 631
Ву:	Revised 5/98

-∞ 5



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

Corporate ID Number <u>DNP-82527</u>	Annual Report for the year 2001
1. The name of the corporation is The JASP	ER Bailet
2. The state or other jurisdiction under the law	vs of which it is incorporated is RHODE ISLAND
3. The address of the registered office of the	corporation in this state is 21 TAFT ROAD CUMBERLAND, RI 02864
and the name of its registered agent in this	s state at that address is ARLENE G. GILBERT
4. The character of the affairs which it is actu	ally conducting in Rhode Island, briefly stated, is <u>fo operate and</u>
dance trope for the pur	ipose of fundraising to support. The trope & ALD
5 If a foreign corporation, the address of its p	principal office in the state or other jurisdiction under the laws of which it is
incorporated is <u>h [4</u>	
	21 TafT Rd
· · · · · · · · · · · · · · · · · · ·	Lumberland RI 02860
	officers: (In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the Island) corporation shall not be less than three (3).)
NAME OFFICE	ADDRESS
Barbara Hassett Director	141 Session ST Providence RT
horraine Purich Director	17 aabby have Bellingham ma
Beverly Levitt MarciscoDirector	166 Terle Mar &r N. King Ston B
Ann Inave Normanian President	400 new River Rd marrille Et
Avlene Gilbert Vice-Presiden	e 21 Taft Rd Cumb RT ozeck
Mary Polovatzick Secretary	31 Bellevue ST Comh PJ
Cavolyn Ribeins Treasurer	25 Spring House Ln Cumb. RJ
Dated: 6-15-01	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.
<u> </u>	Tasser Pulled
	Exact Name of Corporation
FOR SECRETARY OF STATE USE ONLY	Bu March & Con
1 18-01	By Control of the Con
ile Date: 6 78 7	Title TY easure V (Report must be signed by an officer)
heck No.:	
v:	Form No. 631 Revised 5/98

Filing Fee: \$20.00

To be filed annually during the month of June



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

Corporate in Homber 12	NP-82527	Annual Report for the year 2000	
1. The name of the corp	oration is The JASF	PER Ballet	
2. The state or other juri	sdiction under the lav	ws of which it is incorporated is RHODE ISLAND	
3. The address of the re	agistered office of the	corporation in this state is 21 TAFT ROAD CUMBERLAND, RI 02864	
		s state at that address is ARLENE G. GILBERT	
		ually conducting in Rhode Island, briefly stated, is <u>to operate adve</u>	
	•	budgaising to support the troops of Alls ich	
5 If a foreign corporation incorporated is	n, the address of its (principal office in the state or other jurisdiction under the laws of which it is	
6. Corporate address in	Rhode Island	21 Toft Rd	
	Cun	nberland RI oziku	
number of directors o	f a domestic (Rhode :	officers: (In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the Island) corporation shall not be less than three (3).)	
NAME	OFFICE	ADDRESS	
Barbara Hasse		141 Session ST Providence RT	
orraine Purio	Director	17 habby his Bellinghan MA	
Beverly Recold 1	<u>किर्।१%</u> Director	164 Terk Ivar NV N Kingsle RI	
Ann. Marie Cla	<u>rva√e</u> President	the hew River RA Memorile RI	
· · · · · · · · · · · · · · · · · · ·	Vice-Presider		
Mary Dolovatz	C/C_Secretary	31 Rellevue of Combarland Pt	
Carolyn Kill	<u>€ (YC</u> Treasurer	25 Spring House kn Comb 127	
Dated: (₀-/-⊘o		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.	
* 8 2 5 2 T	88 88 7 ★	Exact Name of Corporation	
* 8 2 5 2 T	USE ONLY	Exact Name of Corporation	
111	USB ONLY	By Carela - Riles	
FOR SECRETARY OF STATE de Date: Cold C	USB ONLY	Exact Name of Corporation By	

Filing Fee: \$20.00

To be filed annually during the month of June



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

		IACIA-I	PROFII CORPORATION
Co	rporate ID Number N	ID-82527	Annual Report for the year 1999
1.	The name of the cor	poration is The JAS	PER Ballet
2.	The state or other ju	risdiction under the la	ws of which it is incorporated is Rhode Island
3.			e corporation in this state is 21 TAFT ROAD CUMBERLAND, RI 02864
			is state at that address is ARLENE G. GILBERT
4.	The character of the	affairs which it is act	ually conducting in Rhode Island, briefly stated, is forperate a dance
_	troupe for the	purpose of timb	raising to support the troupe & Alds related causes
5	If a foreign corporation incorporated is	on, the address of its	principal office in the state or other jurisdiction under the laws of which it is
6.	Corporate address in	n Rhode Island <u> ३</u>	
_	<u> </u>		mberland RI 02968
7.	number of directors of	es of its directors and of a domestic (Rhode	officers: (In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the Island) corporation shall not be less than three (3).)
	NAME	OFFICE	ADDRESS
<u>B</u>	urbara Hasseft	Director	141 Session 97 Providence RI 0206
علا	erraine Purice	Director	17 Gabby hu Belling ham Ma 02018
<u>13</u>	every kevitt tha	<u>kc i Se e</u> Director	164 Fewle Mar Dr N. Kingston RT 02802
Ar	in marie Wlem	<u>ente</u> President	400 New Ever Rd Manuille RI 62838
Ax	lene Gilbert	Vice-Presiden	1 21 Toff Ph Cumberland ZI OZFGY
1/1	avy Polovatzic	Secretary	3, Rellevue ST Comberland PInEffe
<u> </u>	arolyn Riberro	Treasurer	as Spring House hn Cumberland PI Orlar
Date	ed: <u>5-1859</u>		Under penalty of perjury, I declare and affirm that I have examined this
	1 (88) de 1816 (1881 Berla 1981)		report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.
			Jasper Ballet
	* 8 2 5 2	7 *	Exact Name of Corporation
	FOR SECRETARY OF STAT	E USE ONLY	By Caroly Files
Checi	k No.: // 75		Title / Lagury (Report must be signed by an officer)
By: _	AIY) /- 	Form No. NP-13 Revised 5/98



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

ПОПТ	NOTIT CORPORATION
orporate ID Number ND-82527	Annual Report for the year_1998
. The name of the corporation is The JASPE	ER Ballet
The state or other jurisdiction under the laws	s of which it is incorporated is RHODE ISLAND
The address of the registered office of the o	corporation in this state is 21 TAFT ROAD CUMBERLAND, RI 02864
and the name of its registered agent in this	state at that address is ARLENE G. GILBERT
	illy conducting in Rhode Island, briefly stated, is to preside a chica
	rincipal office in the state or other jurisdiction under the laws of which it is
. Corporate address in Rhode Island	a i Taft 71
	HAZO IV GROWAN
	fficers: (In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the sland) corporation shall not be less than three (3).)
NAME OFFICE	ADDRESS
Ann. Marie Clemed Director	1100 how Kinger Rd Hyd sou maxwille PJ Oze sp
Santara Hasself Director	141 Session 57 From FT 028900
CHOINE PULICE Director	17 Gabby have Bellingham the asolf
everly Levi- herason President	11. 6 Taxie mar Dr h Kingder RJ 02552
Arlene G. Gilbert Vice-President	21 Tar, 22 Comperland RI oricu
in y roluvatorck Secretary	3 i Bellevice ST (Yould - RJ oxlar
Treasurer Titory o Treasurer	15 spring House hn Comb. PI ociou
ated: <u>6 - 9 - 98</u>	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.
	Jason Bellet
* 8 2 5 2 7 *	Exact Name of Corporation
FOR SECRETARY OF STATE USE ONLY C Date:	By Carry y Zilie
eck No.: \\53	Title
: CDA	Form No. NP-13 Revised 5/98

To be filed annually during the month of June

Filing Fee: \$20.00

State of Rhode Island and Providence Plantations

Corporation Division 100 North Main Street Providence, RI 02903

NON-PROFIT CORPORATION

0082527	1997 Annual Report for the year
FIRST: The name of the corporation is	The JASPER Ballet
SECOND: It is incorporated under the	laws of Rhode Island
THIRD: The character of the affairs w	hich it is actually conducting in Rhode Island, briefly stated, is
to vaise funds for AID	s service organizations & support the dove
+4008 ·	address of its principal office in the state or country under the laws of
FIFTH: Corporate address in Rhode Is	sland 21 Taft Rd
	Cumberland RI Oasky
SIXTH: Names and addresses of its d Reenactment of 1994, the number of Directors	irectors and officers: (In compliance with 7-6-23 of the R.I.G.L. 1956, of a corporation shall not be less than three (3).)
THIS REPORT WILL NOT BE AC	CCEPTED UNLESS THREE (3) DIRECTORS ARE LISTED.
NAME OFFICE	ADDRESS
Ann maxic Clemente Director	Hoo New River Rds 6 Manuille RJ OZF38
Kathan Vn05 paw Director	80 Fisher Pata-Comb ZI 02864
horraine Parich Director	17 Galy Ln Bellingham ma 02018
Bevery Levitt-harcist President	166 Terre Max Dr . n. Kingstown RI OZPS
Avlene Gilbert Vice-Presiden	n 21 Taft Rol Cumb. PI ozlav
Mary Poloval ZICK Secretary	31 Bellevue ST Comb RIT 02960
Carolyn Riberto Treasurer (If additional space is needed, attach rider)	25 Spring House Ln Cumb RF 02464
Dated: 6:36 1987 JUL 0 9 1581 LONG 20 - 1129	(Name of Corporation) By Mary Johnson Johnson Title Selectary (Report must be signed by an officer)
By 10#30-1159	(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form N-14 must be filed.

• Please contact the Corporation Division, 277-3040, for further information.

Corporate ID Number 0083527

Annual Report for the year......1995

State of Rhode Island and Providence Plantations

Corporation Division 100 North Main Street Providence, RI 02903

NON-PROFIT CORPORATION

FIRST: The name of the corporation is ...The...JASPER_Eallet......

SECOND: It is incorporated under the	laws of Rhode Island		
THIRD: The character of the affairs which it is actually conducting in Rhode Island, briefly stated, is ாட்டாத் இ			
All S-related Causes FOURTH: If a foreign corporation, the	address of its principal office in the state or country under the laws of		
which it is incorporated is			
FIFTH: Corporate address in Rhode Is	and altast Rd		
	Cumberland RI 62864		
	rectors and officers: (In compliance with 7-6-23 of the R.I.G.L. 1956, of a corporation shall not be less than three (3).)		
THIS REPORT WILL NOT BE AC	CEPTED UNLESS THREE (3) DIRECTORS ARE LISTED.		
NAME OFFICE	ADDRESS		
Ann marie Clemente Director	400 hew River Rd Apt 506 Manville R. I 0253A		
Bevery Levill-Herrisco Director	166 Terre Mar dr M. Kingston Pt 02852		
Cynthia matuewe 25th Director	510 South Main ST woonsectet RT 02895		
Arlene Gilbert President	21 Toft Rd Cumberland RI ozfex		
kathan Ann Mospan Vice-President	80 Fisher Rd # 25 Comberland RIOZRY		
Mary Polyvatzick Secretary	31 Bellevue SI Comberland RI ozer		
Corclyn Ryden Yo Treasurer (If additional space is needed, attach rider)	56 ABorn Ave Cumberland RI ozfey		
Dated: 6-6 1996	Jasper Ballet		
ck. 1091 (10/96	(Name of Corporation)— By Chapleys There		
W 6/10/96	Title The Legger (Report must be signed by an officer)		