



Department of State - Business Services Division

FILED

JUN 10 2019

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Annual Report for the year:

2019

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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16442

1. Entity ID Number 16442		2. Exact name of the Corporation Educational Advocates of RI Inc.			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Educational Advocates			
4. NAICS Code 611710					
6. Principal Office Address 215 Washington St.			City W-Warwick	State RI	Zip 02893
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Michael J. Capalbo			Vice-President Name Petea M. Capalbo		
Street Address 4 Flinstone Court			Street Address 5 Hill Top Dr.		
City E. Greenwich	State RI	Zip 02818	City E. Greenwich	State RI	Zip 02818
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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 David Hart			Director Name Dominic Rancellotta		
Street Address 87 Meredith Dr.			Street Address 46 Elmgrove Ave.		
City Cranston	State RI	Zip 02908	City Smithfield	State RI	Zip 02917
Director Name Gregory Amoroso			Director Name		
Street Address 46 North Hill St.			Street Address		
City E. Providence	State RI	Zip 02914	City	State	Zip
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 Michael J. Capalbo				Date 6/6/19	
Signature of Officer/Authorized Representative Michael J. Capalbo				SIGN DOCUMENT HERE	