



**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. 001608681

2. Name of Corporation CENTRAL HIGH SCHOOL ALUMNI ASSOCIATION PROVIDENCE

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

6

611110

4. Corporate Address in Rhode Island

No. and Street: 70 FRICKER STREET

City or Town: PROVIDENCE

State: RI

Zip: 02903

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

TO ASSIST CENTRAL HIGH SCHOOL STUDENTS, FACULTY AND ADMINISTRATION WITH NEEDS AND ACTIVITIES THAT CANNOT BE OR ARE NOT MET BY THE PROVIDENCE SCHOOL DEPARTMENT. TO FOSTER CAMARADERIE, SUPPORT, MENTORING AND NETWORKING AMONG PREVIOUS AND NEW GRADUATES OF CENTRAL HIGH SCHOOL, PROVIDENCE RI.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	DEBRA COCKFIELD	166 EAST STREET PAWTUCKET, RI 02860 USA
TREASURER	JAYNE OBRIEN	39 POPPY DRIVE CRANSTON, RI 02920 USA
SECRETARY	SALVATORE MASIELLO	940 QUAKER LANE, #2413 WAWICK, RI 02818 USA
DIRECTOR	DIANNE LANA	355 WILLARD AVENUE PROVIDENCE, RI 02902 USA
DIRECTOR	ANNA MARIE RICHMOND	6 OAK TREE LANE CRANSTON, RI 02920 USA
DIRECTOR	ELAINE COLANIERI	151 HAZELTON STREET CRANSTON, RI 02920 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**

DONALD D. BIANCO 70 FRICKER STREET PROVIDENCE , RI 02903

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

Signed this 28 Day of June, 2019 at 12:25:16 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 JAYNE OBRIEN
Signature of Authorized Person

Form No. 631
Revised 09/07