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State of Rhode Island and Providence Plantations

Department of State - Business Services Division



2019 NOV -8 PM 12: 30

Statement of Change of Agent

DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: \$10.00

statement for the purpose of changing its registered agent in the State of Rhode Island:	
Entity ID Number 2. Exact Name of the Corporation	ation
30364 William Winson	Parent Teacher Organization
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:	
Street Address 562 Putnam Pike	
City/Town Greenville	State RHODE ISLAND Zip 62828
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:	
Debra Casale	
5. The address of the NEW registered office is:	
Street Address (NOT a P.O. Box) 562 Putnam Pike	
City/Town areenville	State RHODE ISLAND Zip 02828
6. The name of the NEW registered agent is:	
Brian Ackerman	
7. The address of the corporation's registered office and the address of the office of its registered agent, as changed, will be identical.	
8. The change was authorized by a resolution duly adopted by its board of directors.	
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Agent by the Corporation, and that all statements contained herein are true and correct.	
Name of President/Vice President of the Corporation	Date
Jill Austin	11-4-19
Signature of President/Vice President of the Corporation SIGN DOCUMENT HERE	

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED

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BY La YWAKE

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