

**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: 2020**1. Corporate ID No.** 000164850**2. Name of Corporation** Portsmouth United for Education, Incorporated**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

813410**4. Corporate Address in Rhode Island**No. and Street: 29 MIDDLE ROADCity or Town: PORTSMOUTH

State: RI

Zip: 02871

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

A SPONSORING ORGANIZATION TO COORDINATE EDUCATION, EXTRA CURRICULAR AND ENRICHMENT ACTIVITIES FOR ALL STUDENTS OF PORTSMOUTH, RHODE ISLAND PUBLIC SCHOOLS

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Incorporator is no longer applicable; please delete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	CLAIRE RYAN	144 CARRIAGE DRIVE PORTSMOUTH, RI 02871 USA
TREASURER	MARIANNE RAYMO	1597 WEST MAIN ROAD PORTSMOUTH, RI 02871 USA
SECRETARY	JENN COLLINS	PO BOX 706 PORTSMOUTH, RI 02871 USA
VICE PRESIDENT	DAVID BELEZARIAN	42 LEPES ROAD PORTSMOUTH, RI 02871 USA
DIRECTOR	ERIN AGUIAR	770 BRISTOL FERRY ROAD PORTSMOUTH, RI 02871 USA
DIRECTOR	MAURA SHEEHAN	105 SEA MEADOW DRIVE PORTSMOUTH, RI 02871 USA
DIRECTOR	KATHLEEN RUSSELL	805 MIDDLE ROAD PORTSMOUTH, RI 02871 USA
DIRECTOR	LYNN RUDOLPH	44 SISSON POND ROAD PORTSMOUTH, RI 02871 USA
DIRECTOR	DANA SQUIRES	129 GREENFILED AVE PORTSMOUTH, RI 02871 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**

MARIANNE RAYMO 1597 WEST MAIN ROAD PORTSMOUTH , RI 02871

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

Signed this 10 Day of June, 2020 at 11:54:34 AM 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 MARIANNE RAYMO
Signature of Authorized Person

Form No. 631
Revised 09/07