



RI SOS Filing Number: 202042126010 Date: 6/12/2020 4:00:00 PM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

**FILED**

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Annual Report for the year:

Non-Profit Corporation

2020

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number <b>000051481</b>		2. Exact name of the Corporation <b>Silver Lake Annex Multi Purpose Community Center</b>			
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island <b>Non-Profit</b>			
4. NAICS Code <b>624410 - Child Day Care Ser</b>					
6. Principal Office Address <b>529 Plainfield Street</b>			City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</b>
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Steven Piscopiello</b>			Vice-President Name <b>Carl Calicchia</b>		
Street Address <b>85 Fox Ridge Dr</b>			Street Address <b>1190 Danielson Pike</b>		
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02921</b>	City <b>N Scituate</b>	State <b>RI</b>	Zip <b>02857</b>
Secretary Name <b>Marisa Mancini</b>			Treasurer Name <b>Laurie Blatz</b>		
Street Address <b>40 Lake Garden Dr</b>			Street Address <b>81B Valley Green Ct</b>		
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</b>	City <b>N. Prov</b>	State <b>RI</b>	Zip <b>02904</b>
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Michelle Cantini</b>			Director Name <b>Angelica Iglizzi</b>		
Street Address <b>250 Phenix Ave</b>			Street Address <b>25 Legion Memorial Dr</b>		
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</b>	City <b>Prov</b>	State <b>RI</b>	Zip <b>02909</b>
Director Name <b>Gregory Pompei</b>			Director Name <b>Maya Cannon</b>		
Street Address <b>36 Legion Memorial Dr</b>			Street Address <b>360 Killingly ST</b>		
City <b>Prov</b>	State <b>RI</b>	Zip <b>02909</b>	City <b>Prov</b>	State <b>RI</b>	Zip <b>02909</b>
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>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.</b>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative <b>STEVEN PISCOPIELLO - CHAIRMAN</b>					Date <b>6/9/20</b>
Signature of Officer/Authorized Representative <i>[Signature]</i>					

MAIL TO:  
Division of Business Services  
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