



**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. 000715570

2. Name of Corporation Jewish Day School of 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: 85 TAFT AVENUE

City or Town: PROVIDENCE

State: RI

Zip: 02906

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 ESTABLISH, MAINTAIN AND OPERATE A NON PROFIT EDUCATIONAL INSTITUTE FOR LEARNING AND FOR PROVIDING EDUCATIONAL SERVICES TO STUDENTS AT THE PRE-KINDERGARTEN, PRIMARY, ELEMENTARY AND OR SECONDARY LEVEL AS WELL AS EDUCATION IN JEWISH TRADITIONS, VALUES CULTURE AND RELIGION

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	SHOSHANA JACOB	85 TAFT AVENUE PROVIDENCE, RI 02906 USA
TREASURER	RACHEL FRIEDBERG	85 TAFT AVENUE PROVIDENCE, RI 02906 USA
SECRETARY	ROCHELLE ROSEN	85 TAFT AVENUE PROVIDENCE, RI 02906 USA
VICE PRESIDENT	BARUCH SACHS	85 TAFT AVE PROVIDENCE, RI 02906 USA
DIRECTOR	LESLEY BOGAD	85 TAFT AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	DEBRA HERMAN	85 TAFT AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	JUDY ROSENSTEIN	85 TAFT AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	HOWARD VOSS-ALTMAN	85 TAFT AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	MARA OSTRO	85 TAFT AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	DUFFY PAGE	85 TAFT AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	JUSTIN SCHLEIFER	85 TAFT AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	KENNY HERSH	85 TAFT AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	ROBERT LANDAU	85 TAFT AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	RASHMI LICHT	85 TAFT AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	PENNEY STEIN	85 TAFT AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	SALLY ROTENBERG	85 TAFT AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	RACHEL MERSKYWODA	85 TAFT AVENUE PROVIDENCE, RI 02906 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

ANDREA KATZMAN 85 TAFT AVENUE PROVIDENCE , RI 02906

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

Signed this 17 Day of June, 2020 at 1:46:53 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 SHOSHANA JACOB
Signature of Authorized Person

Form No. 631
Revised 09/07

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