RI SOS Filing Number: 202043892130 Date: 6/30/2020 6:07:00 PM



State of Rhode Island and Providence Plantations Office of the Secretary of State

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. 000028382
- 2. Name of Corporation R. I. INSTITUTE FOR LABOR STUDIES AND RESEARCH
- 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 <u>click here.</u>

NAICS Code

6

Fee: \$20.00

610000

4. Corporate Address in Rhode Island

No. and Street: 1540 PONTIAC AVENUE

SUITE A

City or Town: CRANSTON State: RI Zip: 02920 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

THE PROVISION OF EDUCATION AND RESEARCH TO WORKING PEOPLE AND THEIR RESPECTIVE ORGANIZATIONS.

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Incorporator is no longer applicable; please delete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 | Address |
|---------------------|-----------------------------|---|
| | First, Middle, Last, Suffix | Address, City or Town, State, Zip Code, Country |
| VICE CHAIRPERSON | PAUL MAC DONALD | 514 COLWELL ROAD HARRISVILLE, RI 02830 USA |
| SECRETARY-TREASURER | LAWRENCE PURTILL | 99 BALD HILL ROAD CRANSTON, RI 02920 USA |
| CHAIRPERSON | GEORGE NEE | 194 SMITH STREET PROVIDENCE, RI 02908 USA |
| EXECUTIVE DIRECTOR | ROBERT DELANEY | 1540 PONTIAC AVENUE SUITE A CRANSTON, RI 02920 USA |
| DIRECTOR | MEREDITH SIDOTI | 149 RIDGE ROAD SMITHFIELD, RI 02917 USA |
| DIRECTOR | MATTHEW TAIBI | 121 BRIGHTRIDGE AVENUE EAST PROVIDENCE, RI 02914 USA |
| DIRECTOR | FRANK FLYNN | 356 SMITH STREET PROVIDENCE, RI 02908 USA |
| DIRECTOR | GEORGE HEALY JR. | 10 SYCAMORE DRIVE EAST GREENWICH, RI 02818 USA |
| DIRECTOR | NANCY IADELUCA | 319 BROADWAY PROVIDENCE, RI 02909 USA |
| DIRECTOR | MARIO BUENO | 626 BROAD STREET CENTRAL FALLS, RI 02863 USA |
| DIRECTOR | KATHY MCELROY | 1258 ELMWOOD AVENUE UNIT#1 PROVIDENCE, RI 02907 USA |
| DIRECTOR | TIMONTHY BYRNE | 11 HEMINGWAY DRIVE EAST PROVIDENCE, RI 02915 USA |
| DIRECTOR | RONALD COIA | 410 SOUTH MAIN STREET PROVIDENCE, RI 02903 USA |
| DIRECTOR | J. MICHAEL DOWNEY | 1179 CHARLES STREET NORTH PROVIDENCE, RI 02904 USA |
| DIRECTOR | WILLIAM KENNEDY | 13 CLARKE ROAD COVENTRY, RI 02816 USA |
| DIRECTOR | LINDA MCDONALD | 375 BRANCH AVENUE PROVIDENCE, RI 02816 USA |
| DIRECTOR | TIM MELIA | 278 SILVE SPRING STREET PROVIDENCE, RI 02904 USA |
| DIRECTOR | STEVEN MINICUCCI | 1 DORRANCE PLAZA PROVIDENCE, RI 02903 USA |
| DIRECTOR | D. SCOTT MOLLOY | 134 WHISPERING PINE WAY EXETER, RI 02822 USA |
| DIRECTOR | CHRISTOPHER BUFFERY | 22 AMFLEX DRIVE CRANSTON, RI 02921 USA |
| DIRECTOR | PATRICK QUINN | 319 BROADWAY PROVIDENCE, RI 02909 USA |
| DIRECTOR | MICHAEL SABITONI | 410 SOUTH MAIN STREET PROVIDENCE, RI 02903 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

ROBERT DELANEY 1540 PONTIAC AVENUE, SUITE A CRANSTON, RI 02920

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

Signed this 30 Day of June, 2020 at 6:10:11 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 HARLEE LALLI

Signature of Authorized Person

Form No. 631 Revised 09/07

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