



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. 001678430

2. Name of Corporation Providence DSA

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

813319

4. Corporate Address in Rhode Island

No. and Street: 23 PEACE TRAIL

City or Town: SMITHFIELD

State: RI

Zip: 02917

Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 23 PEACE PIPE TRAIL

City or Town: SMITHFIELD

State: RI

Zip: 02917

Country: USA

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

THIS CORPORATION IS ORGANIZED TO PROMOTE SOCIAL WELFARE WITHIN THE MEANING OF SECTION 501(C)(4) OF THE INTERNAL REVENUE CODE OF 1986, AS NOW ENACTED OR HEREAFTER AMENDED (HEREINAFTER, "THE CODE"). IN PURSUIT OF THIS PURPOSE, THE CORPORATION SHALL SEEK TO FACILITATE THE TRANSITION TO A TRULY DEMOCRATIC AND SOCIALIST SOCIETY, ONE IN WHICH THE MEANS/RESOURCES OF PRODUCTION ARE DEMOCRATICALLY AND SOCIALLY CONTROLLED .

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	DANIEL T CROWELL	23 PEACE PIPE TRAIL SMITHFIELD, RI 02917 USA
TREASURER	DAVID RAILEANU	165 POWER ST. UNIT 4 PROVIDENCE, RI 02906 USA
DIRECTOR	KINVERLY DICUPE	560 PROSPECT ST. APT. 44 PAWTUCKET, RI 02860 USA
DIRECTOR	JULIUS FERRARO	140 CHAPIN AVE. FL. 3 PROVIDENCE, RI 02909 USA
DIRECTOR	MATTHEW LYSIK	320 WESTMORELAND ST. UNIT A3 NARRAGANSETT, RI 02882 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**

DANIEL CROWELL 23 PEACE PIPE TRAIL SMITHFIELD , RI 02917

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

Signed this 3 Day of July, 2020 at 1:40:57 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 DANIEL T CROWELL
Signature of Authorized Person

Form No. 631
Revised 09/07

© 2007 - 2020 State of Rhode Island and Providence Plantations
All Rights Reserved