



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.** 000031191

**2. Name of Corporation** The Crescent Park Carousel Preservation Association

**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

813990

**4. Corporate Address in Rhode Island**

No. and Street: 145 TAUNTON AVENUE

City or Town: EAST PROVIDENCE

State: RI

Zip: 02914

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**

SOLICITING FINANCIAL CONTRIBUTIONS AND GIFTS TO FUND PROGRAMS FOR THE RESTORATION, MAINTENANCE AND OPERATION OF THE HISTORIC LOOFF CAROUSEL

**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**Incorporator is no longer applicable; please delete**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**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	STEPHEN COSTA	20 ARCADIA AVE EAST PROVIDENCE, RI 02916 USA
SECRETARY	BRUCE ROGERS	500 WARREN EAST PROVIDENCE, RI 02914 USA
DIRECTOR	BEVERLY LEFORT	44 BRIGHTRIDGE AVE. EAST PROVIDENCE, RI 02914 USA
DIRECTOR	JOAN HANRAHAN MILLER	94 CLYDE AVE. EAST PROVIDENCE, RI 02914 USA
DIRECTOR	ANTHONY FERREIRA	44 BRIGHTRIDGE AVENUE EAST PROVIDENCE, RI 02914 USA
DIRECTOR	LUMENA RODRIGUES	128 SMITH STREET RIVERSIDE, RI 02915 USA
DIRECTOR	DO.NNA MCMAHON	233 NORTON ST EAST PROVIDENCE, RI 02915 USA
DIRECTOR	MICHELLE RHEA	16 LOTTIE DRIVE EAST PROVIDENCE, RI 02915 USA
DIRECTOR	IZILDA FERNANDEZ	50 WALNUT STREET EAST PROVIDENCE, RI 02914 USA
DIRECTOR	LISA GEORGE	20 ARCADIA AVE EAST PROVIDENCE, RI 02916 USA
DIRECTOR	DAVID BACHRACH	145 TAUNTON AVENUE EAST PROVIDENCE, RI 02914 USA
DIRECTOR	RICARDO MOURATO	86 BEVERLY RD RIVERSIDE, RI 02915 USA
DIRECTOR	DENNIS THIBEAULT	90 CEDAR AVE RIVERSIDE, RI 02915 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**

TRACY JOHNSON 145 TAUNTON AVENUE EAST PROVIDENCE , RI 02914

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

**Signed this 14 Day of July, 2020 at 9:15:31 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 TRACY A. JOHNSON  
Signature of Authorized Person

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