



State of Rhode Island
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. 001700234

2. Name of Corporation The Providence Project

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

813211

4. Corporate Address in Rhode Island

No. and Street: ONE RICHMOND SQUARE, SUITE 330W

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

THE PURPOSE OF THE CORPORATION IS TO FINANCIALLY SUPPORT OTHER CHARITABLE AND EDUCATION BASED NONPROFITS LOCALLY IN PROVIDENCE AND THROUGHOUT RHODE ISLAND AND TO CARRY ON ANY OTHER LAWFUL ACTIVITY IN SUPPORT AND TO THE

BENEFIT OF THE FOREGOING STATE PURPOSED AS MAY BE CARRIED ON BY AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE OF 1986, AS AMENDED, AND BY A CORPORATION FORMED UNDER THE RHODE ISLAND NONPROFIT CORPORATION ACT, R.I. GEN. LAWS 7-6 ET SEQ.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	DAVID H. LABORDE	15 EVERETT AVENUE PROVIDENCE, RI 02906 USA
TREASURER	SARAH COWAN JOHNSON	76 LONGWOOD AVENUE PROVIDENCE, RI 02906 USA
TREASURER	ANDREW MOOK	11 NISBIT STREET PROVIDENCE, RI 02906 USA
DIRECTOR	DAVID H. LABORDE	15 EVERETT AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	SARAH COWAN JOHNSON	76 LONGWOOD AVENUE PROVIDENCE, RI 02908 USA
DIRECTOR	ANDREW MOOK	11 NISBIT STREET 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**

BENJAMIN L. RACKLIFFE PANNONE LOPES DEVEREAUX & O'GARA 1301 ATWOOD AVENUE,
SUITE 215N JOHNSTON , RI 02919

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 July, 2020 at 3:16:06 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 BENJAMIN L. RACKLIFFE
Signature of Authorized Person

