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Department of State - Business Services Division

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Annual Report for the year: Non-Profit Corporation

2016

2020 OCT 23 P 3: 18:1

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→ Filing	period.	June	1	- June	30

→ Filing Fee: \$20 00

-> Penalty. Additional \$25.00 fee if form is not filed by July 30.

·	<u> </u>							
Entity ID Number	2. Exact name of the Corporation							
000688787	PechaKucha Providence							
3 State of Incorporation	5. Brief description of the character of business conducted in Rhode Island							
RI	EDUCATING RESIDENTS OF THE GREATER PROVIDENCE METROPOLITAN AREA ON TOPICS							
4. NAICS Code	RELATING TO ECONOMIC, CULTURAL, HISTORICAL, POLICTICAL, ARTISTIC AND							
611699		BY PROVIDING AN OPPORT I SLIDE PRESENTATION FO		NTATIONS IN A				
6. Principal Office Address	20 31.1171. 181 20	- SECOND EACH	City	State	Žip			
400 Westminster Street, Suite 200			Providence		l i			
			rrovidence	RI	02903			
7. List ALL officers (names and addresses) Check the box to indicate an attachment								
President Name Christopher Donovan			Vice-President Name Gary Saint Laurent					
Street Address 92 Messer Street, Apt 2			Street Address 335 Church Avenue					
City Providence	State RI	Zip 02909	City Warwick	State R1	Zip 02889			
Secretary Name Angela Maradola			Treasurer Name Christopher Donovan					
Street Address 231 Wickenden Street			Street Address 92 Messer Street, Apt 2					
City Providence	State RI	Zip 02903	City Providence	State R1	^{Zip} 02903			
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment								
Director Name Christopher Donovan			Director Name Gary Saint Laurent					
Street Address 92 Messer Street, Apt 2			Street Address 335 Church Street					
City Providence	State RI	Z ₁ p 02909	City Warwick	State RJ	^{Zip} 02889			
Director Name Angela Marandola			Director Name Ray Nunez					
Street Address 231 Wickenden Street			Street Address 37 Willow Street, Floor #3					
C:ty Providence	State RI	^{Zip} 02903	City Providence	State RI	Z _{1P} 02909			
9. The Registered Agent informatio	n of record with th	ne RI Department	t of State is accurate. Change	s require filing Form 641				
Under penalty of perjury, I declar statements, and that all statemen	re and affirm tha nts contained he	t I have examine rein are true and	ed this report, including any discorrect.	accompanying sched	ules and			
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee								
Name of Officer/Authorized Repres	Date	Date						
Tobias Lederberg, Assistant Secretary				10/20/2020				
Signature of Officer/Authorized Rep					 -			
Tol-ledery FILEDM								

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov OCT 2 3 2020

BY MSAK89

ATTACHMENT TO 2016 ANNUAL REPORT FOR PECHAKUCHA PROVIDENCE

7. Additional Officer(s)

Assistant Secretary:

, . S

Name: Tobias Lederberg

Address: 400 Westminster Street, Providence, RI 02903

8. Additional Director(s):

Name: Jennifer Soares

Address: 144 Hudson Street #2, Providence, RI 02909