



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
(401) 222-3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 127782		2. Name of Corporation Riveredge Arts Project, Inc.	
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address 68 South Main Street	
		City Woonsocket	Zip 02895
5. Foreign corporation. Enter principal office address		City	State
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island PROVIDE EDUCATIONALLY AND ECONOMICALLY DISENFRANCHISED WOONSOCKET YOUTH WITH THE KEYS TO SELF-SUFFICIENCY THROUGH PAID EMPLOYMENT IN THE ARTS.			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Joseph Schechtman		Vice President Name Jonathan Howard	
Street Address 27 Linden Road		Street Address 178 North Street	
City Parrington	State RI	City Providence	State RI
Zip 02806		Zip 02906	
Secretary Name Jane Parillo		Treasurer Name Mike Gerhardt	
Street Address 26 Main Street		Street Address 39 Bagu Winkle Cove	
City E. Greenwich	State RI	City Warren	State RI
Zip 02818		Zip 02885	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☒ FILL IN SPACES BEFORE USING ATTACHMENTS			
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23			
Director Name Michael Gerhardt		Director Name Jane Parillo	
Street Address 39 Bagu Winkle Cove		Street Address 26 Main Street	
City Warren	State RI	City E. Greenwich	State RI
Zip 02885		Zip 02818	
Director Name Katherine Fontaine		Director Name Louise LaMountain	
Street Address 8 Abbott Park Pl		Street Address 515 Social St.	
City Providence	State RI	City Woonsocket	State RI
Zip 02903		Zip 02895	
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78			
Agent Name MICHELLE NOVELLO		Address	
Address 137 PARK DRIVE		City RIVERSIDE	Zip 02915

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



127782

File Date 6-8-05
Check No 667
By [Signature]
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Joseph Schiechtman 6/6/05
Signature of Officer Date
Joseph Schiechtman
Print or Type Name of Officer
Board President
Title of Officer



68 S. MAIN ST. • WOONSOCKET RI 02895 • PHONE 401-767-2100 • FAX 401-767-2102 • info@RiverzEdgeArts.org

BOARD OF DIRECTORS

**CHAIRMAN/
PRESIDENT** **JOSEPH SCHECHTMAN, M.Ed** • Schechtman & Associates, PRESIDENT
27 Linden Road, Barrington, RI 02806 • PHONE 401-245-0032 • FAX 401-247-2756
Fquad@aol.com

**VICE
PRESIDENT** **JONATHAN HOWARD** • Cause & Effect, Inc, VICE PRESIDENT
178 Ninth Street, Providence, RI 02906 • PHONE 401-331-2272 • FAX 401-621-9572
jon@ceffect.com

TREASURER **MICHAEL GERHARDT, MBA** • MANAGEMENT CONSULTANT
39 Bagy Wrinkle Cove, Warren, RI 02885 • 401-247-2097 • FAX 401-247-9746
mgerhardt39@yahoo.com

SECRETARY **JANE PARILLO, M.Ed** • Scribe (store), BUSINESS OWNER • ARTIST • EDUCATOR
26 Main Street, East Greenwich, RI 02818
PHONE 401-884-4150 • FAX 401-295-8447 • Jane@janeparilloscribe.com

KATHERINE FONTAINE, MA • Johnson & Wales University, SERVICE LEARNING
COORDINATOR 8 Abbott Park Place, Providence, RI 02903 • PHONE 401-598-1312
FAX 401-598-1277 • kfontaine@jwu.edu

LOUISE LAMOUNTAIN • NRI Child and Adolescent Services System Program
DIRECTOR • 18 Monument Square, Suite 302, Woonsocket, RI 02895
PHONE 401-762-3986, FAX 401-762-4007 • llamountain@nrcommunityservices.org

GASTON MALLOY • Seekonk High School, MUSIC DIRECTOR
DIRECTOR Malloi Entertainment • 384 Roger Williams Ave, Rumford, RI 02916
PHONE 401-431-0856 FAX 401-438-5901 • ninette5@cox.net

JUSTIN MATTHEWS • WOONSOCKET HIGH SCHOOL STUDENT/RIVERZEDGE PARTICIPANT
182 Cumberland Street #68, Woonsocket, RI 02895

KEVIN SHEAHAN • Sheahan Printing Corporation, BUSINESS OWNER
One Front Street, Woonsocket, RI 02895 • PHONE 401-769-9200 • FAX 401-769-9206
PHONE EVES 508-336-6608 • Kevin@sheahanprinting.com



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			State RI
			Zip 02906
Secretary Name Jane Parillo		Treasurer Name Michael Gerhardt	
Street Address 26 Main St		Street Address 39 Bagy Wrinkle Cove	
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Agent Name MICHELLE NOVELLO		Address	
Address 137 PARK DRIVE		City RIVERSIDE	Zip 02915

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 2 7 7 8 2 *

File Date	8/31/04
Check No	287
By	DA
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

X **Joseph Schechtman** **6/17/04**
Signature of Officer Date
JOSEPH SCHECHTMAN
Print or Type Name of Officer
BOARD PRESIDENT
Title of Officer

RiverzEdge Arts Project

BOARD OF DIRECTORS

CHAIRMAN/ PRESIDENT **JOSEPH SCHECHTMAN, M.Ed** • Schechtman & Associates, PRESIDENT
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DAMON BUTLER • Artists for Humanity, ASSISTANT ARTISTIC DIRECTOR
281 Summer Street, Boston, MA 02210 • **PHONE** 617-737-2455 • **FAX** 617-737-2457
Dbutler@afhboston.com

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DIRECTOR • 18 Monument Square, Suite 302, Woonsocket, RI 02895
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182 Cumberland Street, Woonsocket, RI 02895

SUSAN RODGERSON • Artists for Humanity, EXECUTIVE DIRECTOR
281 Summer Street, Boston, MA 02210 • **PHONE** 617-737-2455 • **FAX** 617-737-2457
srodgerson@afhboston.com

KEVIN SHEAHAN • Sheahan Printing Corporation, BUSINESS OWNER
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PHONE EVES 508-336-6608 • Kevin@sheahanprinting.com



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Secretary Name JANE PARILLO			Treasurer Name MICHAEL GERHARDT		
Street Address 26 MAIN ST.			Street Address 39 BABY WRINKLE COVE		
City E. GREENWICH	State RI	Zip 02818	City WARREN	State RI	Zip 02885

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Director Name DAMON BUTLER			Director Name GASTON MALLOY		
Street Address 281 SUMMER ST.			Street Address 384 ROGER WILLIAMS AVE.		
City BOSTON	State MA	Zip 02210	City E. PROVIDENCE	State RI	Zip 02916
Director Name JOSEPH GARLICK			Director Name SUSAN RODGERSON		
Street Address 119 BAYARD ST.			Street Address 281 SUMMER ST.		
City PROVIDENCE	State RI	Zip 02906	City BOSTON	State MA	Zip 02210

9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78

Agent Name MICHELLE NOVELLO	Address 137 Park Drive	
Address 137 PARK DRIVE	City RIVERSIDE	Zip 02915

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 2 7 7 8 2 *

File Date 6-20-03
Check No. 107
By [Signature]
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Joseph Schechtman 6/19/03
Signature of Officer Date
Joseph Schechtman
Print or Type Name of Officer
President
Title of Officer