



State of Rhode Island  
Department of State - Business Services Division

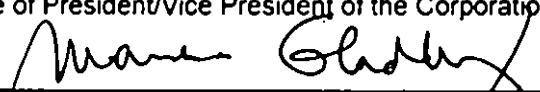
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### Statement of Change of Registered Agent

DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: \$10.00

Pursuant to the provisions of RIGL 7-6-13 or 7-6-78 the undersigned corporation submits the following statement for the purpose of changing its registered agent in the State of Rhode Island:

1. Entity ID Number <b>74035</b>		2. Exact Name of the Corporation <b>JAMESTOWN PARENT TEACHER ORGANIZATION</b>	
3. The address of the registered office as <b>PRESENTLY</b> shown in the records on file with the RI Department of State:			
Street Address <b>1 SWINBURNE Street</b>			
City/Town <b>JAMESTOWN</b>		State <b>RHODE ISLAND</b>	Zip <b>02835</b>
4. The name of the registered agent as <b>PRESENTLY</b> shown in the records on file with the RI Department of State: <b>SUZANNE FAY</b>			
5. The address of the <b>NEW</b> registered office is:			
Street Address ( <b>NOT</b> a P.O. Box) <b>86 COLUMBIA LANE</b>			
City/Town <b>JAMESTOWN</b>		State <b>RHODE ISLAND</b>	Zip <b>02835</b>
6. The name of the <b>NEW</b> registered agent is: <b>MAUREEN GLADDING</b>			
7. The address of the corporation's registered office and the address of the office of its registered agent, as changed, will be identical.			
8. The change was authorized by a resolution duly adopted by its board of directors.			
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Agent by the Corporation, and that all statements contained herein are true and correct.			
Name of President/Vice President of the Corporation <b>MAUREEN GLADDING</b>			Date <b>10/2/2020</b>
Signature of President/Vice President of the Corporation 			

**MAIL TO:**

Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: [www.sos.ri.gov](http://www.sos.ri.gov)

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BY **B5NPZ**  
**AA 3:43pm**

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