



**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: 2021

1. Corporate ID No. 001658833

2. Name of Corporation The Collaborative

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

453920

4. Principal Office Address

No. and Street: 498 MAIN STREET
City or Town: WARREN State: RI Zip: 02885 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

THE ORGANIZATION IS EXCLUSIVELY ORGANIZED AS A NONPROFIT GROUP UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE, TO PROVIDE AN ENVIRONMENT FOR LOCAL ARTISTS THAT SUPPORTS, PROMOTES AND ENCOURAGES CREATIVITY AND INSPIRATION BY FACILITATING INCREASED EXPOSURE AND OPPORTUNITIES THROUGH WORK SPACE, EXHIBITION, AND WEB PRESENCE.

6. Names and Addresses of the Officers and Directors:

All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	SALLY TURNER	8 HANCOCK RD BARRINGTON, RI 02806 USA
TREASURER	ADAM ROBERSTON	27 HOLBURN AVE CRANSTON, RI 02910 USA
DIRECTOR	ADAM ROBERTSON	27 HOLBURN AVE CRANSTON, RI 02910 USA
DIRECTOR	TAMARA C KAPLAN	68 KING ST WARREN, RI 02885 USA
DIRECTOR	SALLY TURNER	8 HANCOCK RD BARRINGTON, RI 02806 USA
DIRECTOR	JULIE FANTECHI	12 SCHOOL ST WARREN, RI 02885 USA
DIRECTOR	JENNIFER HARRIS	35 FAIRVIEW AVE WARREN, RI 02885 USA
DIRECTOR	CHRISTOPHER D'OVIDIO	238 GREENWOOD AVE WARWICK, RI 02886 USA
DIRECTOR	BENJAMIN TERRY	132 ROGERS AVE BARRINGTON, RI 02806 USA

7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER

Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

URIAH DONNELLY 97 CHILD ST WARREN , RI 02885

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

Signed this 9 Day of June, 2021 at 11:11:54 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 URIAH DONNELLY
Signature of Authorized Person

Form No. 631
Revised 09/07