



**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. 000028770

2. Name of Corporation Providence Children's Museum

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

4. Principal Office Address

No. and Street: 100 SOUTH STREET
City or Town: PROVIDENCE State: RI Zip: 02903 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

CHILDREN'S MUSEUM

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	MARTHA ROBERTS	10 BOXWOOD COURT BARRINGTON, RI 02806 USA
SECRETARY	JAIME PERSON	3 EARLE STEWART LANE WRENTHAM, MA 02093 USA
TREASURER	PATRICK MARTIN	1509 MONTEIRO DR NORTH DIGHTON, MA 02764 USA
OTHER OFFICER	JENNIFER BOSE	100 SOUTH STREET PROVIDENCE, RI 02903
PRESIDENT/IMMEDIATE PAST PRESIDENT	MERVIN H BROWNING	36 STUBBLE BROOK ROAD WEST GREENWICH, RI 02817 USA
IMMEDIATE PAST PRESIDENT	MATTHEW O LITTLEFIELD	55 CARRIAGE HOUSE LANE WRENTHAM, MA 02093 USA
DIRECTOR	CAROINE PAYSON	150 UNION ST PROVIDENCE, RI 02903 USA
DIRECTOR	MATT SHEAFF	315 IRON HORSE WAY, SUITE 101 PROVIDENCE, RI 02908 USA
DIRECTOR	KATERI BUERMAN	100 EXCHANGE ST. UNIT 1703 PROVIDENCE, RI 02903 USA
DIRECTOR	JODI-ANN MCLANE	128 DORRANCE STREET SUITE 220 PROVIDENCE, RI 02903 USA
DIRECTOR	JEFFREY E. MEYER	1 OSPREY DR COVENTRY, RI 02816 USA
DIRECTOR	COURTNEY IANNUCCILLI	7 ERIC CT CUMBERLAND, RI 02864 USA
DIRECTOR	STANLEY S DORSEY	278 STILLWATER RD SMITHFIELD, RI 02917 USA
DIRECTOR	KEITH JACOBSON	7 LAWN AVENUE WARWICK, RI 02888 USA
DIRECTOR	LEIYINA TAVAREZ	265 NEWPORT AVENUE PAWTUCKET, RI 02861 USA
DIRECTOR	WENDY GRAY	1250 NARRAGANSETT BOULEVARD CRANSTON, RI 02905 USA
DIRECTOR	GREG VELANDER	3 JULIA CT WEST KINGSTOWN, RI 02892 USA
DIRECTOR	MICHAEL E HOGAN	150 UNION STREET UNIT 2016 PROVIDENCE, RI 02903 USA
DIRECTOR	JOSEPH FARSHIDE	2800 FINANCIAL PLAZA PROVIDENCE, RI 02903 USA
DIRECTOR	MARIANNE PURSLEY	ONE FINANCIAL PLAZA, SUITE 2200 PROVIDENCE, RI 02903 USA
DIRECTOR	FELICIA VINCES	19 EAST MANNING ST PROVIDENCE, RI 02906 USA
DIRECTOR	SUE GARDINER	77 HOLLY HILLS LANE SAUNDERSTOWN, RI 02874 USA
DIRECTOR	EMIKO SUTTON	50 PARK ROW WEST #720 PROVIDENCE, RI 02903 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**

CAROLINE PAYSON 100 SOUTH STREET PROVIDENCE , RI 02903

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 12:26:55 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 JUANIESHA HARVEY
Signature of Authorized Person

Form No. 631
Revised 09/07

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