State of Rhode Island and Providence Plantations
**Department of State - Business Services Division**

**FILED**
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JUN 11 2021
BY 351

**Annual Report for the year: 2021**
**Non-Profit Corporation**
→ Filing period: June 1 - June 30
→ Filing Fee: $20.00
→ Penalty: Additional $25.00 fee if form is not filed by July 30.

| 1. Entity ID Number | 2. Exact name of the Corporation |
|---|---|
| **31280** | **Cumberland School Volunteers, Inc.** |
| 3. State of Incorporation: **Rhode Island** | 5. Brief description of the character of business conducted in Rhode Island: **Cumberland School Volunteers' mission is to support and promote volunteerism in the Cumberland Public Schools. It sponsors two programs at this time: Reading is Fundamental (RIF) and Just Friends - More Alike than Different** |
| 4. NAICS Code: **611110 - Elementary and** | |

| 6. Principal Office Address | City | State | Zip |
|---|---|---|---|
| **2602 Mendon Rd.** | **Cumberland** | **RI** | **02864** |

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

| | | | | | |
|---|---|---|---|---|---|
| President Name: **Jennifer Fisher** | | | Vice-President Name: **Lynne Jordon** | | |
| Street Address: **4 Woodcrest Dr.** | | | Street Address: **28 Clover St.** | | |
| City: **Cumberland** | State: **RI** | Zip: **02864** | City: **Cumberland** | State: **RI** | Zip: **02864** |
| Secretary Name: **Paula Provoyeur** | | | Treasurer Name: **Kath Steinke** | | |
| Street Address: **320 Abbott Run Valley Rd.** | | | Street Address: **94 Sand Hill Dr.** | | |
| City: **Cumberland** | State: **RI** | Zip: **02864** | City: **Durham** | State: **ME** | Zip: **04222** |

8. List ALL directors (names and addresses). RI Corporations **MUST** list at least **THREE** directors. — Check the box to indicate an attachment ☐

| | | | | | |
|---|---|---|---|---|---|
| Director Name: **Kim Smolan** | | | Director Name: **Sabrine Garant** | | |
| Street Address: **1 Shelter Lane** | | | Street Address: **200 Manville Hill Rd. #21** | | |
| City: **Cumberland** | State: **RI** | Zip: **02864** | City: **Cumberland** | State: **RI** | Zip: **02864** |
| Director Name: **Mary Juntunen** | | | Director Name: **Stephanie Zerva** | | |
| Street Address: **14 Geddes Farm Lane** | | | Street Address: **21 Woodcrest Dr.** | | |
| City: **Cumberland** | State: **RI** | Zip: **02864** | City: **Cumberland** | State: **RI** | Zip: **02864** |

9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.

***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.***

*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 Representative | Date |
|---|---|
| **Kath Steinke** | **6/7/2021** |

Signature of Officer/Authorized Representative: Kath Steinke SIGN DOCUMENT HERE

**MAIL TO:**
**Division of Business Services**
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**Website:** www.sos.ri.gov