State of Rhode Island

Department of State - Business Services Division

FILED

JUN 16 2021

BY

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
000029967	Rhode Island Democratic State Committee
3. State of Incorporation: Rhode Island	5. Brief description of the character of business conducted in Rhode Island: Promote the ideals of the Democratic Party
4. NAICS Code: 813940 - Political Organizatio	

6 Principal Office Address	City	State	Zip
200 Metro Center Blvd Suite 201	Warwick	RI	02886

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

President Name: Joseph M. McNamara			Vice-President Name: Grace Diaz		
Street Address: 23 Howie Avenue			Street Address: 45 Adelaide Avenue		
City: Warwick	State: RI	Zip: 02888	City: Providence	State: RI	Zip: 02907
Secretary Name: Arthur Corvese			Treasurer Name: Elizabeth Beretta Perik		
Street Address: 234 Lexington Avenue			Street Adoress: 10 High Street		
City: No Providence	State: RI	Zip: 02904	City: Jamestown	State: RI	Zip: 02835

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

Director Name: Joseph M. McNamara			Director Name: Elizabeth Beretta Perik		
Street Address: 23 Howie Avenue			Street Address: 10 High Street		
City: Warwick	State: RI	Zip: 02888	City: Jamestown	State: RI	Zip: 02835
Director Name: Arthur Corvese			Director Name		
Street Address: 234 Lexington Avenue			Street Address		
City: No Providence	State: RI	Zip: 02904	City	State	Zip

9. The Registered Agent information of record with the RI Department of State is accurate. 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
Joseph M McNamara	June 11, 2021

Signature of Officer/Authorized Representative

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