



**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. 001035766

2. Name of Corporation East Providence Arts Council

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: 19 PLUM RD
City or Town: RIVERSIDE State: RI Zip: 02915 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 10 HILL CT
City or Town: RUMFORD State: RI Zip: 02916 Country: UNI

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

TO PROMOTE AND SUPPORT THE ARTS IN THE CITY OF EAST PROVIDENCE

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	JENNIFER GILLOOLY CAHOON	300 GREENWICH AVE EAST PROVIDENCE , RI 02914 USA
TREASURER	SCOTT T HAGGERTY	10 HILL CT RUMFORD, RI 02916 USA
DIRECTOR	ANNETTE MOZZONI	44 BARTLETT AVENUE CRANSTON, RI 02905 USA
DIRECTOR	KAREN ORSI	173 DOVER AVE EAST PROVIDENCE, RI 02914 USA
DIRECTOR	JEN CAHOON	30 GREENWICH AVE EAST PROVIDENCE, RI 02914 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**

RICHARD LAWSON 19 PLUM ROAD RIVERSIDE , RI 02915

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

Signed this 18 Day of June, 2021 at 4:17:39 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 SCOTT T HAGGERTY
Signature of Authorized Person

Form No. 631
Revised 09/07

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