



**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. 000119765

2. Name of Corporation The Paul Cuffee School

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

611110

4. Principal Office Address

No. and Street: 459 PROMENADE ST.

City or Town: PROVIDENCE

State: RI

Zip: 02908

Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 365 OLNEY STREET

City or Town: PROVIDENCE

State: RI

Zip: 02906

Country:

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

TO INCREASE THE DIVERSITY OF STUDENTS PURSUING SCIENTIFIC AND TECHNICAL CAREERS THROUGH HIGH QUALITY ACADEMIC AND MARITIME TRAINING IN KINDERGARTEN THRU 12TH GRADE PROGRAM FOR STUDENTS FROM PROVIDENCE, RI.

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 | BRADFORD GIBBS | 365 OLNEY STREET PROVIDENCE, RI 02906 USA |
| TREASURER | BABAK TALEGHANI | PO BOX 603333 PROVIDENCE, RI 02906 USA |
| VICE PRESIDENT | LEEDS MITCHELL IV | 365 EDDY STREET PROVIDENCE, RI 02903 USA |
| CLERK | DAVID MATERNE | 6 DANA ROAD BARRINGTON, RI 02806 USA |
| DIRECTOR | MARLON MUSSINGTON | 315 EAST AVENUE PAWTUCKET, RI 02860 USA |
| DIRECTOR | MEKAHLA MCDONNELL | 58 COLUMBIA AVE, 2R CRANSTON, RI 02905 USA |
| DIRECTOR | BRANDFORD DAVIS | 223 WALDO STREET PROVIDENCE, RI 02909 USA |
| DIRECTOR | KARLEY CARTO | PO BOX 40475 PROVIDENCE, RI 02940 USA |
| DIRECTOR | ERIC FULFORD | 80 HANTON RD NO. SMITHFIELD, RI 02896 USA |
| DIRECTOR | JILLIAN BELANGER | 227 DOYLE AVENUE PROVIDENCE, RI 02906 USA |
| DIRECTOR | CARRIE BRIDGES FELIZ | 228 ATLANTIC AVENUE PROVIDENCE, RI 02908 USA |
| DIRECTOR | ANDREA SUMMERS | 53 BELMONT AVENUE PROVIDENCE, RI 02909 USA |
| DIRECTOR | ANA W BARRAZA | 72 ANTHONY AVENUE PROVIDENCE, RI 02909 USA |
| DIRECTOR | DANIEL MOOS | 75 MOUNT HOPE AVENUE PROVIDENCE, RI 02906 USA |
| DIRECTOR | SU ALMEIDA | 120 BLUE HILLS PARKWAY MILTON, MA 02186 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**

CHRISTOPHER J. HASKINS 459 PROMENADE STREET PROVIDENCE , RI 02908

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

Signed this 25 Day of June, 2021 at 12:08:51 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 MARIA PALMGREN
Signature of Authorized Person

Form No. 631
Revised 09/07

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