



**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.** 000551937

**2. Name of Corporation** The Art Connection in Rhode Island

**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



711410

**4. Principal Office Address**

No. and Street: 36 PARK PLACE #2

City or Town: PAWTUCKET

State: RI

Zip: 02860

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**

SOLICITS ORIGINAL DONATED ARTWORKS AND PLACES THEM AT PUBLIC NON  
PROFIT AGENCIES THAT SERVE VULNERABLE CONSTITUENCIES

**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.**

| <b>Title</b> | <b>Individual Name</b><br>First, Middle, Last, Suffix | <b>Address</b><br>Address, City or Town, State, Zip Code, Country |
|--------------|-------------------------------------------------------|-------------------------------------------------------------------|
| PRESIDENT    | JAMES SCOTT                                           | PO BOX 144, 56 ALPINE WAY<br>SLATERSVILLE, RI 02816 USA           |
| TREASURER    | WENDY INGRAM                                          | 36 PARK PLACE #2<br>PAWTUCKET, RI 02860-2211 USA                  |
| DIRECTOR     | LIZ MARTINO                                           | 36 PARK PLACE #2<br>PAWTUCKET, RI 02860-2211 US                   |
| DIRECTOR     | CAREY TERRENOVA                                       | 36 PARK PLACE<br>PAWTUCKET, RI 02860 USA                          |
| DIRECTOR     | KATE SIBYA                                            | 35 PARK PLACE<br>PAWTUCKET, RI 02860 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**

WENDY INGRAM 36 PARK PLACE, #2 PAWTUCKET , RI 02860

**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 9:29:56 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 WENDY C. INGRAM  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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