→ Filing period: June 1 - June 30 → Filing Fee: \$20.00		· 1 1	JL 0 2 2021	ļ
→ Penalty: Additional \$25.00 fee if form is not filed by July 30.			1 238	\mathcal{O}
	•		Al abo	
1. Entity ID Number	2. Exact name of the Corporation			
633.41	Jay Barry Cul	tural Arts Cente	^	
State of Incorporation	5. Brief description of the character	of business conducted in Rhode Isl	and	
RI				_
4. NAICS Code 8 12990	Support of cultural arts in E. Bay area			
6. Principal Office Address		City	State	Zip
أعين والمستقد والأراب المتارك والمتارك	x 530 Main St	Warren	RI	02885
7. List ALL officers (names and addresses) Check the box to indicate an attachment				an attachment
President Name Hanvel E.	Menezes	Vice-President Name		
Street Address GH Highland	Rd.	Street Address		
City Bristol	State Zip Zip	City	State	Zip
Secretary Name Kathin Barry		Treasurer Name Ethel Carex		
Street Address 577 Main St.		Street Address 56 King ST		
Warren	State RI D2885	city Warren	State RI	zip 02885
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors.				
Director Name Thomas & Unight		Director Name July Meneze 5		
Street Address 572 Main St.		Street Address		
City Warren	State RI 202885	city Bristol	State 7	Zip 02809
Director Name Kathryn Kittell Director Name				
Street Address 543 Main St This annual report MUST be signed and dated				
city Warren	by either the President, Vice Pr Secretary, Assistant Secretary, T	reasurer,	State	Zip 02885
9. Registered Agent in Rhode	duly Authorized Representative,	Receiver thent of State. Changes rec	uire filing Form 641.	
Under penalty of perjury, I d statements, and that all statements contains a pure and contact.				
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 Repres	entative	· •	Date 1	1
Manuel E	Menezes		6/8	5/2021
Manuel & Menezes Signature of Officer/Authorized Representative Manuel & Meney es				

ton-Profit Corporation Filing Number: 202198992640 Date: 7/2/2021 4:00:00

IAIL TO:

livision of Business Services

48 W. River Street, Providence, Rhode Island 02904-2615

hone: (401) 222-3040 **Febsite:** www.sos.ri.gov