



**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

**Foreign Non-Profit  
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:** 2020

**1. Corporate ID No.** 001704916

**2. Name of Corporation** Springboard Collaborative

**3. State of Incorporation**

State: PA

**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: 1500 JOHN F. KENNEDY BOULEVARD,  
SUITE 1160

City or Town: PHILADELPHIA

State: PA Zip: 19102 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street: 1500 JOHN F KENNEDY BLVD  
SUITE 1160

City or Town: PHILADELPHIA State: PA Zip: 19102 Country:

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

PROVIDE SUMMER PROGRAMMING

**6. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed.**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	AUBREY WHITE	1500 JOHN F. KENNEDY BOULEVARD, SUITE 1160 PHILADELPHIA, PA 19102 USA
CEO	ALEJANDRO GAC-ARTIGAS	1500 JOHN F KENNEDY BLVD, SUITE 1160 PHILADELPHIA, PA 19102 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**

NORTHWEST REGISTERED AGENT, LLC 47 WOOD AVE STE 2 BARRINGTON , RI 02806

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

**Signed this 6 Day of July, 2021 at 1:10:52 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 TYOBISTA GIRMA  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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