



**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. 000160274

2. Name of Corporation Ocean State Paradise Charities

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



813219

4. Principal Office Address

No. and Street: PO BOX 6955

City or Town: WARWICK

State: RI

Zip: 02887

Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 4 ENGLEWOOD RD

City or Town: COVENTRY

State: RI

Zip: 02816

Country: UNI

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

CHARITABLE FUNDRAISING

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	KEITH KURLANSKY	96 OLD COLONY AVE TAUNTON, MA 02718 USA
TREASURER	SUSAN JONES	4 ENGLEWOOD RD COVENTRY, RI 02816 USA
SECRETARY	KIM ELLINWOOD	16 BOWEN ST CRANSTON, RI 02905 USA
DIRECTOR	SUSAN JONES	4 ENGLEWOOD RD COVENTRY, RI 02816 USA
DIRECTOR	KEITH KURLANSKY	96 OLD COLONY AVE TAUNTON, MA 02718 USA
DIRECTOR	KIM ELLINWOOD	16 BOWEN ST CRANSTON, RI 02905 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

SUSAN JONES 4 ENGLEWOOD RD COVENTRY , RI 02816

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

Signed this 14 Day of July, 2021 at 1:25:07 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 SUSAN JONES
Signature of Authorized Person

Form No. 631
Revised 09/07

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