



State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

Annual Report for the year: **2021**

Non-Profit Corporation

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

FILED

JUL 22 2021

BY

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1. Entity ID Number <b>105487</b>		2. Exact name of the Corporation <b>Rhode Island Shorthand Reporters Association, Inc.</b>			
3. State of Incorporation <b>Rhode Island</b>		5. Brief description of the character of business conducted in Rhode Island <b>To assume responsibility for leadership and enlightenment of the users of verbatim</b>			
4. NAICS Code <b>813910 - Business Association</b>					
6. Principal Office Address <b>115 Phenix Avenue</b>		City <b>Cranston</b>		State <b>RI</b>	Zip <b>02920</b>
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Lori Spremulli Confreda</b>			Vice-President Name <b>Barbara Warner</b>		
Street Address <b>461 Pavillion Avenue</b>			Street Address <b>455 Meshanticut Valley Parkway, Apt 207B</b>		
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02888</b>	City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</b>
Secretary Name <b>Ronald Ronzio</b>			Treasurer Name <b>Patricia Magnone</b>		
Street Address <b>46 Brett Court</b>			Street Address <b>46 Forest Avenue</b>		
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>	City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</b>
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Patricia Magnone</b>			Director Name <b>Dorothy Depointe</b>		
Street Address <b>46 Forest Avenue</b>			Street Address <b>189 Pine Glen Drive</b>		
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</b>	City <b>East Greenwich</b>	State <b>RI</b>	Zip <b>02818</b>
Director Name <b>Lori Spremulli Confreda</b>			Director Name <b>None</b>		
Street Address <b>461 Pavillion Avenue</b>			Street Address		
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02888</b>	City	State	Zip
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</b>					
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 Representative <b>Lori Spremulli Confreda</b>					Date <b>July 12, 2021</b>
Signature of Officer/Authorized Representative <i>Lori Spremulli Confreda</i>					SIGN DOCUMENT HERE

MAIL TO:  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: [www.sos.ri.gov](http://www.sos.ri.gov)