



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. 001710316

2. Name of Corporation Rhode Island Black Film Festival

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



541613

4. Principal Office Address

No. and Street: 225 DYER STTREET 2ND FLOOR

City or Town: PROVIDENCE

State: RI Zip: 02906 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

THE RHODE ISLAND BLACK FILM FESTIVAL WAS ESTABLISHED TO PROVIDE A VEHICLE FOR PRESENTING FILMS PRODUCED BY AND ABOUT PEOPLE OF AFRICAN DESCENT. THE RHODE ISLAND BLACK FILM FESTIVAL PURPOSE IS ALSO TO SERVE AS A CATALYST TO INCREASE DIVERSITY IN RHODE ISLAND'S FILM INDUSTRY. THE RIBFF IS A CREATIVE MEANS TO DISCUSS SOCIAL JUSTICE, HEALTH

AND ECONOMIC ISSUES AFFECTING PEOPLE OF COLOR AS IT IS ENTERTAINING.

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
INCORPORATOR	ANN ALLISON CLANTON	171 PLEASANT STREET PROVIDENCE , RI 02906 USA
DIRECTOR	ANN ALLISON CLANTON	171 PLEASANT STREET PROVIDENCE , RI 02906 USA
DIRECTOR	DARIUS HENDERSON	105 BABCOCK PROVIDENCE , RI 02905 USA
DIRECTOR	TRACEY CLANTON	82 DOYLE AVENUE PROVIDENCE , RI 02906 USA
DIRECTOR	KENDALL MOORE	UPPER COLLEGE ROAD KINGSTON, RI 02865 USA
DIRECTOR	ARIEL CASTILLE	797 WESTMINISTER STREET PROVIDENCE , RI 02903 USA
DIRECTOR	MICHOLAS CREDLE	459 WAPPING ROAD PORTSMOUTH , RI 02871 USA
DIRECTOR	LESHIA IVY	1237 EAST MAIN ROAD PORTSMOUTH, RI 02871 USA
DIRECTOR	MICHAEL BARRY JR	4408 OLIVER STREET HYATTSVILLE, MD 20781 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**

ANN CLANTON 304 THAYER STREET P.O. BOX 2396 PROVIDENCE , RI 02906

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

Signed this 30 Day of July, 2021 at 11:08:00 AM 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 ANN ALLISON CLANTON
Signature of Authorized Person

Form No. 631
Revised 09/07