



**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: February 1 - May 1

*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:** 2022

**1. Corporate ID No.** 000312488

**2. Name of Corporation** PHS Music Boosters, Inc.

**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

**4. Principal Office Address**

No. and Street: 82 RAYNHAM AVE  
City or Town: PORTSMOUTH State: RI Zip: 02871-5716 Country: USA

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

THIS CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, EDUCATIONAL, AND/OR SCIENTIFIC PURPOSES AS DEFINED IN SECTION 501(C)3 OF THE INTERNAL REVENUE CODE, INCLUDING, FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS UNDER SECTION 501(C)3 OF THE INTERNAL REVENUE CODE. THIS CORPORATION SHALL BE A NONPROFIT CORPORATION. THE SPECIFIC PURPOSE FOR WHICH THIS CORPORATION IS FORMED IS TO PROVIDE NECESSARY SUPPORT (FINANCIAL AND OTHERWISE) TO THE MUSIC PROGRAMS AND MUSIC STUDENTS OF PORTSMOUTH HIGH SCHOOL.

**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.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	JOHN JOHNSON	57 WAMPANOAG DR PORTSMOUTH, RI 02871 USA
TREASURER	GARY JEFFERDS	82 RAYNHAM AVE PORTSMOUTH, RI 02871 USA
SECRETARY	GINNY OBERT	5 SCHOONER DRIVE PORTSMOUTH, RI 02871 USA
DIRECTOR	JANE JEFFERDS	82 RAYNHAM AVE PORTSMOUTH, RI 02871 USA
VICE PRESIDENT	MARTHA GOMES	9 HICKS LANE PORTSMOUTH, RI 02871 USA
DIRECTOR	MICHELE BECK SILVERIA	19 BIRCHWOOD DRIVE PORTSMOUTH, RI 02871 USA
DIRECTOR	JAMES D WILKINSON JR	38 WENTWORTH TERRACE PORTSMOUTH, RI 02871 USA
DIRECTOR	GARY JEFFERDS	82 RAYNHAM AVE PORTSMOUTH, RI 02871 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**

JANE JEFFERDS 82 RAYNHAM AVENUE PORTSMOUTH , RI 02871

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

**Signed this 1 Day of February, 2022 at 9:08:15 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 JANE K JEFFERDS  
Signature of Authorized Person

Form No. 631  
Revised 09/07