



**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:** 2023

**1. Corporate ID No.** 001725580

**2. Name of Corporation** The Brian Cervini Aid for the Trade Scholarship Fund

**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

611310

**4. Principal Office Address**

No. and Street: 17 PHILLIP STREET

City or Town: COVENTRY

State: RI

Zip: 02816

Country: US

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

OUR INTENT OF THIS CORPORATION IS TO RAISE FUNDS TO ALLOW A HIGH SCHOOL STUDENT ACCESS INTO NEW ENGLAND INSTITUTE OF TECHNOLOGY TO STUDY THE AUTOMOTIVE TRADE. ALL PROCEEDS AND DONATIONS WILL GO DIRECTLY INTO THIS FUND FOR SAID STUDENT.

**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
DIRECTOR	JOHN T CERVINI	33 KING STREET 2ND FLOOR JOHNSTON, RI 02919 USA
DIRECTOR	LINDSEY A QUIMBY	179 TREMONT STREET CARVER, MA 02330 USA
DIRECTOR	ANTHONY J CERVINI	6 OAKLAND AVE JOHNSTON, RI 02919 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**

CELIA M. CERVINI 17 PHILLIP STREET 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 19 Day of January, 2023 at 10:06:50 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 CELIA M CERVINI  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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