



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023
Non-Profit Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

 RECEIVED
 R.I. DEPT. OF STATE
 BUS SVCS DIV

2023 MAR 24 A 10:36

1. Entity ID Number 000139898		2. Exact name of the Corporation The Rhode Island JumpStart Coalition for Personal Financial Literacy			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island TO STRENGTHEN THE PERSONAL FINANCIAL LITERACY OF INDIVIDUALS IN RHODE ISLAND TITLE: 7-6			
4. NAICS Code 611110 - Elementary and Seco <input type="checkbox"/>					
6. Principal Office Address 9 Remington Street			City Warwick	State RI	Zip 02888
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input checked="" type="checkbox"/>					
President Name Margaret Brooks			Vice-President Name Bob Barber		
Street Address 9 Remington Street			Street Address 30 Rise-N-Sun Drive		
City Warwick	State RI	Zip 02888	City Hope	State RI	Zip 02831
Secretary Name Joy Tavano			Treasurer Name Catherine Choiniere		
Street Address 15 Ann Lane			Street Address 200 Post Road, Unit 328		
City North Kingstown	State RI	Zip 02852	City Warwick	State RI	Zip 02888
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Gail Walker			Director Name Gail Mance-Rios		
Street Address RISLA			Street Address CCRI		
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02886
Director Name Justin Bownds			Director Name Gina Rigby		
Street Address 207 University Avenue			Street Address One Old Ferry Road		
City Providence	State RI	Zip 02906	City Bristol	State RI	Zip 02809
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
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.					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative Margaret Brooks					Date 3/24/23
Signature of Officer/Authorized Representative 					

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

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 MAR 24 2023
 BY FNCHT

The Rhode Island JumpStart Coalition for Personal Financial Literacy

Entity 000139898

2023 Board of Directors (Continued)

Director Name: **Maria Tavarozzi**

Street Address: 3 Apple Orchard Lane

City: Smithfield

State: RI

Zip: 02917

Director Name: **Charon Rose**

Street Address: 413 Central Ave, Apt 3-306

City: Pawtucket

State: RI

Zip: 02861

Director Name: **Richard Garland**

Street Address: 58 Albert Street

City: Portsmouth

State: RI

Zip: 02871

Director Name: **James Gemma**

Street Address: 160 Shaw Avenue

City: Cranston

State: RI

Zip: 02905