



**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 - ENTER THE CURRENT FILING YEAR 2023: 2023**

**1. Corporate ID No.** 000792214

**2. Name of Corporation** West Side Montessori

**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

624410

**4. Principal Office Address**

No. and Street: 73 STANWOOD STREET

City or Town: PROVIDENCE

State: RI

Zip: 02907

Country: USA

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

TO PROVIDE QUALITY EARLY EDUCATIONAL OPPORTUNITIES USING MONTESSORI PHILOSOPHY, CORE VALUES, AND PEDAGOGY TO INFORM ALL INSTRUCTION, ACTIVITIES, STAFF ENGAGEMENTS, PARENT ENGAGEMENTS AND WORKSHOPS, COMMUNITY PARTNERSHIPS AND LEADERSHIP.

**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
SECRETARY	COLLEEN O'DONNELL	20 HARRISON STREET PROVIDENCE, RI 02909 USA
VICE PRESIDENT	ANGELIA DURAN	172 NARRAGANSETT STREET CRANSTON, RI 02905 USA
DIRECTOR	EUDAD GONZALEZ	24 EMERSON STREET PEABODY, MA 01960 USA
PRESIDENT	OLATUNDE KAMSON	58 TIFFANY STREET PROVIDENCE, RI 02908 USA
DIRECTOR	SABRINA URIBE RUGGIERO	23 HOWARD STREET CRANSTON, RI 02920 USA
DIRECTOR	JOSHUA XAVIER	40 NORTH ORCHARD STREET NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	ANNY SERRANO	35 NORTH FAIRVIEW STREET JOHNSTON, RI 02919 USA
DIRECTOR	CARLON HOWARD	66 RAVENSWOOD AVE PROVIDENCE, RI 02908 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**

AMY BORAK 73 STANWOOD STREET PROVIDENCE , RI 02907

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

**Signed this 11 Day of May, 2023 at 4:26:18 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 SABRINA URIBE  
Signature of Authorized Person

Form No. 631  
Revised 09/07