



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.

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R.I. DEPT. OF STATE  
BUS SVCS DIV

2023 MAY 15 A 10:48

|  |                    |   |                        |
|--|--------------------|---|------------------------|
| 1. Entity ID Number<br><u>000695899</u>  |                    | 2. Exact name of the Corporation<br><u>Job Club RI</u>  |                        |
| 3. State of Incorporation<br><u>R.I.</u>   |                    | 5. Brief description of the character of business conducted in Rhode Island<br><u>CAREER COUNSELING JOB PLACEMENT WORKSHOPS</u> |                        |
| 4. NAICS Code<br><u>624190</u>   |                    |   |                        |
| 6. Principal Office Address<br><u>3524 West Shore Rd #302</u>  |                    | City<br><u>WARWICK</u>  | State<br><u>RI</u>     |
|  |                    | Zip<br><u>02806</u>   |                        |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |                    |   |                        |
| President Name<br><u>STEPHEN COLETTA</u>   |                    | Vice-President Name<br><u>KATHY DOWNS</u>   |                        |
| Street Address<br><u>3524 West Shore Rd #302</u>   |                    | Street Address<br><u>46 Basswood Rd</u>   |                        |
| City<br><u>WARWICK</u>   | State<br><u>RI</u> | City<br><u>CRANSTON</u>   | State<br><u>RI</u>     |
| Zip<br><u>02806</u>  |                    | Zip<br><u>02908</u>   |                        |
| Secretary Name<br><u>KATHY DOWNS</u>   |                    | Treasurer Name<br><u>MARY LACROIX</u>   |                        |
| Street Address<br><u>46 Basswood Rd</u>  |                    | Street Address<br><u>567 Hopkins Hill Rd</u>  |                        |
| City<br><u>CRANSTON</u>  | State<br><u>RI</u> | City<br><u>COVENTRY</u>   | State<br><u>RI</u>     |
| Zip<br><u>02908</u>  |                    | Zip<br><u>02806</u>   |                        |
| 8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span> |                    |   |                        |
| Director Name<br><u>STEPHEN COLETTA</u>  |                    | Director Name<br><u>KATHY DOWNS</u>   |                        |
| Street Address<br><u>3524 West Shore Rd #302</u>   |                    | Street Address<br><u>46 Basswood Rd</u>   |                        |
| City<br><u>WARWICK</u>   | State<br><u>RI</u> | City<br><u>CRANSTON</u>   | State<br><u>RI</u>     |
| Zip<br><u>02806</u>  |                    | Zip<br><u>02908</u>   |                        |
| Director Name<br><u>MARY LACROIX</u>   |                    | Director Name   |                        |
| Street Address<br><u>567 Hopkins Hill Rd</u>   |                    | Street Address  |                        |
| City<br><u>COVENTRY</u>  | State<br><u>RI</u> | City  | State                  |
| Zip<br><u>02806</u>  |                    | Zip   |                        |
| 9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.  |                    |   |                        |
| <b>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.</b>        |                    |   |                        |
| This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee   |                    |   |                        |
| Name of Officer/Authorized Representative<br><u>STEPHEN COLETTA</u>  |                    | FILED 1048  | Date<br><u>5-15-23</u> |
| Signature of Officer/Authorized Representative<br><u>[Signature]</u>   |                    | MAY 15 2023<br>1004   |                        |

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