



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: 2020

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

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1. Entity ID Number <b>001693426</b>		2. Exact name of the Corporation <b>POLISHED GEMs Inc.</b>			
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island <b>Training and development organization for the Empowerment of women and girls of color. Providing access and opportunity to personal development, Mentorship, wellness, Travel and entrepreneurship!</b>			
4. NAICS Code <b>611000</b>					
6. Principal Office Address <b>211 VERMONT AVE</b>			City <b>Providence</b>	State <b>RI</b>	Zip <b>02905</b>
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>STERLING A CLINTON</b>			Vice-President Name <b>Ashley Russell Spellman</b>		
Street Address <b>211 Vermont Ave</b>			Street Address <b>211 Vermont Ave</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02905</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02905</b>
Secretary Name <b>Rochelle Clinton - Fernandez</b>			Treasurer Name <b>Elkinsette Clinton</b>		
Street Address <b>249 Cunningham Drive</b>			Street Address <b>330 Lake Valley Drive</b>		
City <b>Anniston</b>	State <b>AL</b>	Zip <b>36201</b>	City <b>Loganville</b>	State <b>RI</b>	Zip <b>30052</b>
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>STERLING A CLINTON</b>			Director Name <b>Ashley Russell Spellman</b>		
Street Address <b>211 Vermont Ave</b>			Street Address <b>211 Vermont Ave</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02905</b>	City	State	Zip <b>02905</b>
Director Name <b>Elkinsette Clinton</b>			Director Name <b>Rochelle Clinton - Fernandez</b>		
Street Address <b>330 Lake Valley Drive</b>			Street Address <b>249 Cunningham Drive</b>		
City <b>Loganville</b>	State <b>GA</b>	Zip <b>30052</b>	City <b>Anniston</b>	State <b>AL</b>	Zip <b>36201</b>
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>					
<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 <b>Sterling A Clinton</b>					Date <b>7/19/2023</b>
Signature of Officer/Authorized Representative 					<b>FILED</b>

**FILED**  
JUL 27 2023  
BY ML ZEGHX  
4:28

MAIL TO:  
Division of Business Services  
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