



**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. 001728847

2. Name of Corporation Pleasant View Elementary School PTO

3. State of Incorporation

State: RI

NAICS CODE

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

611110

4. Principal Office Address

No. and Street: 100 PLEASANT VIEW AVE

PEACH BLOSSOM LANE

City or Town: SMITHFIELD

State: RI Zip: 02917 Country: USA

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

THE MISSION OF THE PTO IS TO FOSTER A SPIRIT OF COOPERATION AND COMMUNICATION AMONG ALL MEMBERS OF OUR SCHOOL COMMUNITY, AND TO HELP DEVELOP A CLOSER RELATIONSHIP BETWEEN HOME AND SCHOOL.

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	ALYCIA CASAZZA	13 PEACH BLOSSOM LANE GREENVILLE, RI 02828 USA
DIRECTOR	CARLY WARRENER	188 AUSTIN AVENUE CHEPACHET, RI 02814 USA
DIRECTOR	DEB BETTENCOURT	15 GREENLAKE DRIVE GREENVILLE, RI 02828 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**

BROOKE ROSSI 100 PLEASANT VIEW AVE SMITHFIELD , RI 02917

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

Signed this 7 Day of August, 2023 at 1:39:49 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 ALYCIA CASAZZA
Signature of Authorized Person

Form No. 631
Revised 09/07

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