



**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. 000817551

2. Name of Corporation Winsor Hill 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 THERESA STREET

City or Town: JOHNSTON

State: RI

Zip: 02919

Country: USA

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

TO FULFILL THE NEEDS OF CHILDREN TO SUPPORT THE IMPROVEMENT OF
EDUCATION

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	Address
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	JENNIFER WHOLEY	28 WARREN AVENUE JOHNSTON, RI 02919-2218 USA
TREASURER	COURTNEY LEJEUNE	34 MORTON AVE JOHNSTON, RI 02919 USA
VICE PRESIDENT	KRISTY PISTACCHIO	3 WAGON TRAIL JOHNSTON, RI 02919 USA
DIRECTOR	KRISTY PISTACCHIO	3 WAGON TRAIL JOHNSTON, RI 02919 USA
DIRECTOR	JENNIFER WHOLEY	28 WARREN AVENUE JOHNSTON, RI 02919 USA
DIRECTOR	COURTNEY LEJEUNE	34 MORTON AVE JOHNSTON, RI 02919 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

KRISTY PISTACCHIO 100 THERESA STREET JOHNSTON , RI 02919

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

Signed this 8 Day of September, 2023 at 10:04:56 AM 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 JENNIFER A WHOLEY

Signature of Authorized Person

Form No. 631
Revised 09/07

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