RI SOS Filing Number: 202343583530 Date: 12/27/2023 2:26:00 PM

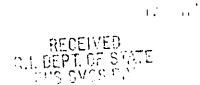


State of Rhode Island Department of State - Business Services Division

Annual Report for the year: 2024 **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. | | | | | |
|--|--|----------------------|---------------------------------------|----------|-------------------------|
| 1. Entity ID Number | 2. Exact name of the Corporation 2023 DEC 21 P 2: 24 | | | | 4 |
| 001721963 | Revolve Dance Project Inc. | | | | |
| 3. State of Incorporation | 5. Brief description of the character of business conducted in Rhode Island | | | | |
| Rhode Island | Performing Arts Company bringing together musicians and dancers to | | | | |
| 4. NAICS Code | create original collaborative works of art and educate the next generation of artists through outreach programs. | | | | |
| 711120 | | | | | |
| 6. Principal Office Address | | | City | State | Zip |
| 14 Gorton Street | | | Providence | RI | 02906 |
| 7. List ALL officers (names and addresses) Check the box to indicate an attachment | | | | | |
| President Name Kirsten Evans | | | Vice-President Name Cameron MacIntosh | | |
| Street Address 14 Gorton Street | | | Street Address 14 Gorton Street | | |
| City Providence | State RI | ^{Zip} 02906 | ^{City} Providence | State RI | Zip 02906 |
| Secretary Name Brenna DiFrancesco | | | Treasurer Name Jenay Evans | | |
| Street Address 11 Winthrop Drive | | | Street Address 282 Lake Street | | |
| City Middletown | State RI | ^{Zip} 02842 | ^{City} Seekonk | State MA | Zip 02771 |
| 8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment | | | | | |
| Director Name Kirsten Evans | | | Director Name Cameron MacIntosh | | |
| Street Address 14 Gorton Street | | | Street Address 14 Gorton Street | | |
| City Providence | State RI | ^{Zip} 02906 | City Providence | State RI | ^{Zip} 02906 |
| Director Name Brenna DiFrancesco | | | Director Name | | |
| Street Address 11 Winthrop Drive | | | Street Address | | |
| ^{City} Middletown | State RI | ^{Zip} 02842 | City | State | Zip |
| 9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641, | | | | | |
| 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. | | | | | |
| 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 | | | | Date | |
| Kirsten Evans | | | | 12/26/23 | |
| Signature of Officer/Authorized Representative FILED | | | | | |
| MAU TO | | | DEC 9.7 2022 | | |

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov DEC 2 7 2023

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