



**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 YEAR 2024:** 2024

**1. Corporate ID No.** 001662180

**2. Name of Corporation** Rhode Island Spotlight

**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

813319

**4. Principal Office Address**

No. and Street: P.O. BOX 2412

City or Town: PROVIDENCE

State: RI

Zip: 02906

Country: USA

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

THE CORPORATION PROVIDES PROMOTIONAL SUPPORT SERVICES FOR LOCAL COMMUNITY SERVICE ORGANIZATIONS AND PEOPLE, INCLUDING, FOR SUCH PURPOSES, EDUCATING THE PUBLIC ON COMMUNITY ACTIVITIES AND ADVOCATING FOR COMMUNITY PHILANTHROPY AND OTHER SUPPORTS ON BEHALF OF THE CITIZENS AND RESIDENTS OF THE STATE.

**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	ARLENE VIOLET	499 COUNTY ROAD BARRINGTON, RI 02806 USA
DIRECTOR	ROBERT MIGLIACCIO	118 FERRY LANE BARRINGTON, RI 02806 USA
DIRECTOR	NICHOLAS GORHAM	7042 FLAT RIVER ROAD COVENTRY, RI 02827 USA
DIRECTOR	JOAQUIN DEAMORIM	500 COUNTY RD BARRINGTON, RI 02806 USA
DIRECTOR	JIM HUMMEL	8 HEARTHWOOD DR BARRINGTON, RI 02806 USA
DIRECTOR	GREG PORCARO	2258 POST ROAD WARWICK, RI 02886 USA
DIRECTOR	CAROL YOUNG	3 SYLVIA LANE LINCOLN, RI 02865 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

JIM HUMMEL 8 HEARTHWOOD DRIVE BARRINGTON , RI 02806

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

Signed this 5 Day of February, 2024 at 1:08:08 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 WILLIAM J FELKNER  
Signature of Authorized Person

Form No. 631  
Revised 09/07