



**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. 001719845

2. Name of Corporation ALTERNATIVES TO VIOLENCE PROJECT -- RHODE ISLAND, INC.

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: 315 OLNEY STREET
PROVIDENCE, RI. 02906

City or Town: PROVIDENCE State: RI Zip: 02906 Country: USA

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

SUCH AS ARE PERMITTED UNDER THE RHODE ISLAND NONPROFIT CORPORATION ACT INCLUDING, BUT NOT LIMITED TO THE DEVELOPMENT AND IMPLEMENTATION OF EDUCATION PROGRAMS WHICH LEAD TO CONFLICT RESOLUTION BASED ON THE ALTERNATIVES TO VIOLENCE PROJECT CURRICULA. TO SEEK FUNDING TO IMPLEMENT PROGRAMS AT THE COMMUNITY AND INSTITUTIONAL LEVEL SEEKING TO INVOLVE JUVENILES, ADULTS, THEIR

FAMILIES, WITHIN RHODE ISLAND, TO COLLABORATE TOWARD RESOLVING CONFLICTS AND BUILD TRANSFORMATIVE AND RESTORATIVE JUSTICE IN ACCORD WITH THE TENETS OF ALTERNATIVES TO VIOLENCE PROJECT

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
TREASURER	MARTHA B MCMANAMY	315 OLNEY STREET PROVIDENCE, RI 02906 USA
SECRETARY	MORGANNA BELTRE	25 ELMGROVE AVENUE JOHNSTON, RI 02919 USA
PRESIDENT	HOWARD JENKINS	30 ROCHAMBEAU AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	MARCUS MITCHELL	135 ABBOTT STREET PROVIDENCE, RI 02906 USA
DIRECTOR	ROBERT WATT	84 SHIP STREET PROVIDENCE, RI 02903 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

ROBERT D. WATT JR. 84 SHIP STREET PROVIDENCE , RI 02903

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 1:10:10 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 MARTHA B. MCMANAMY
Signature of Authorized Person

Form No. 631
Revised 09/07