RI SOS Filing Number: 202446831150 Date: 2/20/2024 10:09:00 AM



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**: <u>2024</u>

- 1. Corporate ID No. 000028611
- 2. Name of Corporation PROVIDENCE JEWELERS' CLUB
- 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 <u>click here.</u>

NAICS Code

813990

4. Principal Office Address

No. and Street: PO BOX 14203

City or Town: <u>EAST PROVIDENCE</u> State: <u>RI</u> Zip: <u>02914</u> Country: <u>USA</u>

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

BRINGING TOGETHER PEOPLE ENGAGED IN THE JEWELRY BUSINESS IN THE PROVIDENCE AREA SO THAT NECESSARY INFORMATION ABOUT THE INDUSTRY MAY BE DISSEMINATED AND EXCHANGED; PROVIDING A MEETING PLACE FOR PEOPLE ENGAGED IN THE VARIOUS PHASES OF THE INDUSTRY AND FOR THEIR CUSTOMERS AND SUPPLIERS; AND GENERALLY SUPPLEMENTING THE ACTIVITIES OF THE VARIOUS TRADE ASSOCIATIONS IN THE JEWELRY BUSINESS ON AN INFORMAL BASIS

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 |
|----------------|--|---|
| PRESIDENT | PHILIP SOWA | PO BOX 14203 EAST PROVIDENCE, RI 02914 USA |
| TREASURER | WILLIAM GENOVESE | PO BOX 14203 E PROVIDENCE, RI 02914 USA |
| SECRETARY | CHRISTINE MCDERMOTT | PO BOX 14203 E PROVIDENCE, RI 02914 USA |
| VICE PRESIDENT | TINA GOSSELIN | PO BOX 14203 E PROVIDENCE, RI 02914 USA |
| DIRECTOR | LINDA COUTU | PO BOX 14203 E PROVIDENCE, RI 02914 USA |
| DIRECTOR | JAMES ROCCHIO | PO BOX 14203 E PROVIDENCE, RI 02914 USA |
| DIRECTOR | ASHLEY CIMINI SINGH | PO BOX 14203 E PROVIDENCE, RI 02914 USA |
| DIRECTOR | NICHOLAS DRISCOLL | PO BOX 14203 E PROVIDENCE, RI 02914 USA |
| DIRECTOR | STEPHANIE CINQUEGRANO | PO BOX 14203 E PROVIDENCE, RI 02914 USA |
| DIRECTOR | ALEXYS GARREPY | PO BOX 14203 E PROVIDENCE, RI 02914 USA |
| DIRECTOR | JOHN HOUSER | PO BOX 14203 E PROVIDENCE, RI 02914 USA |
| DIRECTOR | REGINA CIARLEGLIO | PO BOX 14203 E PROVIDENCE, RI 02914 USA |
| DIRECTOR | PHILIP RICCIOTTI | PO BOX 14203 E PROVIDENCE, RI 02914 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

DICHRISTOFERO & ASSOCIATES, LLC 2180 MENDON ROAD UNIT 34 CUMBERLAND, RI 02864

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

Signed this 20 Day of February, 2024 at 10:10:54 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 SCOTT W DICHRISTOFERO CPA Signature of Authorized Person Form No. 631 Revised 09/07 © 2007 - 2024 State of Rhode Island All Rights Reserved