



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. 001764464

2. Name of Corporation Stephen Olney 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: 1378 DOUGLAS AVE

City or Town: NORTH PROVIDENCE

State: RI

Zip: 02904

Country: USA

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

TO RAISE FUNDS TO HELP RUN SCHOOL EVENTS

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

INCORPORATOR	ANTHONY PACITTO	1378 DOUGLAS AVENUE NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	MANDY BAKER	8 HILLVIEW DRIVE NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	ANTHONY PACITTO	1378 DOUGLAS AVENUE NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	TAMMY LAMOUNTAIN	122 DUTCHESS AVENUE NORTH PROVIDENCE, RI 02904 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**

MANDY BAKER 1378 DOUGLAS AVENUE NORTH PROVIDENCE , RI 02904

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

**Signed this 26 Day of February, 2024 at 11:12:10 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 MANDY BAKER  
Signature of Authorized Person

Form No. 631  
Revised 09/07

© 2007 - 2024 State of Rhode Island  
All Rights Reserved