



**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.** 000029142

**2. Name of Corporation** Societa Mutuo Soccorso Maria Santissima del Bosco di Panni

**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

813110

**4. Principal Office Address**

No. and Street: 40 HAVEN AVE

City or Town: CRANSTON State: RI Zip: 02920 Country: USA

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

TO PROMOTE AND FOSTER INTEREST IN THE SOUTHERN ITALIAN HERITAGE BY RELIGIOUS, EDUCATIONAL, CHARITABLE, CULTURAL, AND RECREATIONAL ACTIVITIES.

**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.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	DAVID VENDITELLI	80 CLYDE ST WEST WARWICK, RI 02893 USA
TREASURER	STEPHEN RUSSO	228 BELVEDERE DR CRANSTON, RI 02920 USA
SECRETARY	LOUIS MANSOLILLO	36 MEMORIAL AVE JOHNSTON, RI 02920 USA
VICE PRESIDENT	JASON PARENTEAU	20 STONEY VIEW DR CUMBERLAND, RI 02864 USA
DIRECTOR	LOUIS SPREMULLI	21 DEER VIEW RD JOHNSTON, RI 02919 USA
DIRECTOR	ANDREA PAGLIA	64 SHERMAN AVE NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	BARBARA LONGO	9 BETH AVE WARREN, RI 02885 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

LOUIS SPREMULLI 2 CAPRI DRIVE JOHNSTON , RI 02919

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

**Signed this 23 Day of March, 2024 at 12:37:15 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 STEPHEN RUSSO  
Signature of Authorized Person

Form No. 631  
Revised 09/07