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# 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. 000164204
- 2. Name of Corporation Providence After School Alliance, 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 <u>click here.</u>

NAICS Code

<u>624110</u>

#### 4. Principal Office Address

No. and Street: <u>81 CARPENTER STREET</u>

City or Town: PROVIDENCE State: RI Zip: 02903 Country: USA

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

TO MOBILIZE, COORDINATE AND SUPPORT THE NETWORK OF EXISTING PROVIDENCE AFTER SCHOOL PROGRAM PROVIDERS, AND TO ASSIST IN BUILDING THE CAPACITY OF THE CITY OF PROVIDENCE AND NON-PROFIT PROVIDERS OF AFTER SCHOOL PROGRAMS TO INCREASE ACCESS TO

#### 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	BENJAMIN MCGUIRE	ONE INTERNATIONAL PLACE BOSTON, MA 02110 USA
SECRETARY	MARGARET FARRELL	50 KENNEDY PLAZA, SUITE 1500 PROVIDENCE, RI 02903 USA
DIRECTOR	BENJAMIN APPLEYARD	11 BOWDEN AVENUE BARRINGTON, RI 02806 USA
DIRECTOR	CAROL GRANT	53 BRETON AVENUE PROVIDENCE , RI 02906 USA
DIRECTOR	AYANA MELVAN	35 SHERWOOD DRIVE WESTERLY, RI 02891 USA
DIRECTOR	HENRY HODGE	9 SNAKE HILL ROAD GLOUCESTER, RI 02814 USA
DIRECTOR	JAYNE DONEGAN	40 WESTMINSTER STREET PROVIDENCE, RI 02903 USA
CHAIR	MAYOR BRETT P SMILEY	25 DORRANCE STREET PROVIDENCE, RI 02906 USA
DIRECTOR	JAVIER MONTANEZ	797 WESTMINSTER STREET PROVIDENCE, RI 02903 USA
DIRECTOR	GENSIS SANCHEZ TAVAREZ	307 GREENWICH AVE, APT E202 WARWICK, RI 02886 USA
DIRECTOR	NICOLE VERDI	ORSTED AMERICAS PROVIDENCE, RI 02908 USA
DIRECTOR	RACHEL COLAIACE	23 EAST MANNING STREET PROVIDENCE, RI 02906 USA
DIRECTOR	JUSTIN REID	15 ADELPHI AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	AMY CRANE	286 NAYATT ROAD BARRINGTON, RI 02806 USA
DIRECTOR	STEPEHN GRACE	300 FRONT STREET PAWTUCKET, RI 02860 USA
DIRECTOR	ASHLIE GRILZ	200 EXCHANGE STREET, UNIT 512 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

JOSHUA TEVEROW, ESQ. 55 PINE 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 19 Day of April, 2024 at 10:19:24 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 **GAUTAM SARIN**

Signature of Authorized Person

Form No. 631 Revised 09/07

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