RI SOS Filing Number: 202452188570 Date: 4/23/2024 2:58:00 PM



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. 000035861
- 2. Name of Corporation The Greater Providence Chamber Foundation
- 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>813910</u>

4. Principal Office Address

No. and Street: <u>C/O PARTRIDGE SNOW & HAHN</u>

40 WESTMINSTER ST. SUITE 1100

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

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

FOR CHARITABLE EDUCATIONAL AND SCIENTIFIC PURPOSES AND TO IDENTIFY DEVELOP OPERATE FUND SUPPORT PROMOTE AND ENCOURAGE CHARITABLE EDUCATIONAL AND SCIENTIFIC PROGRAMS AND PROJECTS

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	LAURIE WHITE	GREATER PROVIDENCE CHAMBER OF COMMERCE 30 EXCHANGE TER PROVIDENCE, RI 02903 USA
TREASURER	PATRICIA THOMPSON	PICCERELLI, GILSTEIN 144 WESTMINSTER ST PROVIDENCE, RI 02903 USA
SECRETARY	BRIAN SPERO	BEACON MUTUAL INSURANCE CO ONE BEACON CENTRE WARWICK, RI 02886 USA
CHAIR	DIANA FRANCHITTO	HOPEHEALTH 1085 NORTH MAIN ST. PROVIDENCE, RI 02904 USA
DIRECTOR	JONATHAN DUFFY	DUFFY & SHANLEY 10 CHARLES ST PROVIDENCE, RI 02904 USA
DIRECTOR	ROBERT VINCENT	IGT 10 MEMORIAL BLVD PROVIDENCE, RI 02903 USA
DIRECTOR	DAVID GILDEN	PARTRIDGE SNOW & HAHN 40 WESTMINSTER ST 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

<u>DAVID M. GILDEN, ESQ. PARTRIDGE SNOW & HAHN LLP 40 WESTMINSTER STREET, SUITE 1100 PROVIDENCE, RI 02903</u>

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 April, 2024 at 3:00:13 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 VALERIE MURRAY

Signature of Authorized Person

Form No. 631 Revised 09/07

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