



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: **2024**

Non-Profit Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

**FILED**

**APR 25 2024**

BY P. M. 1429

|                                                                                                                                                                                                                    |                 |                                                                                                                                                                                                                                                                                                                                      |                                            |                    |                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|--------------------|--------------------------|
| 1. Entity ID Number<br><b>000136581</b>                                                                                                                                                                            |                 | 2. Exact name of the Corporation<br><b>Rhode Island Rhythm &amp; Blues Preservation Society, Inc.</b>                                                                                                                                                                                                                                |                                            |                    |                          |
| 3. State of Incorporation<br><b>2003</b>                                                                                                                                                                           |                 | 5. Brief description of the character of business conducted in Rhode Island<br><b>To preserve &amp; promote R&amp;B in RI through activities, events &amp; education; to improve public awareness of R&amp;B; to improve the legacy, heritage &amp; historical connections of R&amp;B music in the evolution of American popular</b> |                                            |                    |                          |
| 4. NAICS Code<br><b>813319</b>                                                                                                                                                                                     |                 |                                                                                                                                                                                                                                                                                                                                      |                                            |                    |                          |
| 6. Principal Office Address<br><b>12 Kipling Street</b>                                                                                                                                                            |                 | City<br><b>Providence</b>                                                                                                                                                                                                                                                                                                            |                                            | State<br><b>RI</b> | Zip<br><b>02907</b>      |
| 7. List ALL officers (names and addresses). <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>                                                                    |                 |                                                                                                                                                                                                                                                                                                                                      |                                            |                    |                          |
| President Name <b>Cleveland Kurtz</b>                                                                                                                                                                              |                 |                                                                                                                                                                                                                                                                                                                                      | Vice-President Name <b>Maxwell Whiting</b> |                    |                          |
| Street Address <b>12 Kipling Street</b>                                                                                                                                                                            |                 |                                                                                                                                                                                                                                                                                                                                      | Street Address <b>24 Jennifer Lane</b>     |                    |                          |
| City <b>Providence</b>                                                                                                                                                                                             | State <b>RI</b> | Zip <b>02907</b>                                                                                                                                                                                                                                                                                                                     | City <b>Stoughton</b>                      | State <b>MA</b>    | Zip <b>02072</b>         |
| Secretary Name <b>Sylvia Whiting</b>                                                                                                                                                                               |                 |                                                                                                                                                                                                                                                                                                                                      | Treasurer Name <b>Sylvia Whiting</b>       |                    |                          |
| Street Address <b>24 Jennifer Lane</b>                                                                                                                                                                             |                 |                                                                                                                                                                                                                                                                                                                                      | Street Address <b>24 Jennifer Lane</b>     |                    |                          |
| City <b>Stoughton</b>                                                                                                                                                                                              | State <b>MA</b> | Zip <b>02072</b>                                                                                                                                                                                                                                                                                                                     | City <b>Stoughton</b>                      | State <b>MA</b>    | Zip <b>02072</b>         |
| 8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span> |                 |                                                                                                                                                                                                                                                                                                                                      |                                            |                    |                          |
| Director Name <b>Tom Colantonio</b>                                                                                                                                                                                |                 |                                                                                                                                                                                                                                                                                                                                      | Director Name <b>Paul Williams</b>         |                    |                          |
| Street Address <b>8 Blackberry Knoll Way</b>                                                                                                                                                                       |                 |                                                                                                                                                                                                                                                                                                                                      | Street Address <b>PO Box 41694</b>         |                    |                          |
| City <b>Johnston</b>                                                                                                                                                                                               | State <b>RI</b> | Zip <b>02919</b>                                                                                                                                                                                                                                                                                                                     | City <b>Providence</b>                     | State <b>RI</b>    | Zip <b>02940</b>         |
| Director Name <b>Guillermina Sanchez</b>                                                                                                                                                                           |                 |                                                                                                                                                                                                                                                                                                                                      | Director Name <b>Dhana Whiteing</b>        |                    |                          |
| Street Address <b>174 Lawn Street</b>                                                                                                                                                                              |                 |                                                                                                                                                                                                                                                                                                                                      | Street Address <b>35 Academy Way</b>       |                    |                          |
| City <b>Providence</b>                                                                                                                                                                                             | State <b>RI</b> | Zip <b>02908</b>                                                                                                                                                                                                                                                                                                                     | City <b>Providence</b>                     | State <b>RI</b>    | Zip <b>02908</b>         |
| 9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.                                                                                        |                 |                                                                                                                                                                                                                                                                                                                                      |                                            |                    |                          |
| <b>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</b>        |                 |                                                                                                                                                                                                                                                                                                                                      |                                            |                    |                          |
| <i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</i>                                          |                 |                                                                                                                                                                                                                                                                                                                                      |                                            |                    |                          |
| Name of Officer/Authorized Representative<br><b>Sylvia Whiting</b>                                                                                                                                                 |                 |                                                                                                                                                                                                                                                                                                                                      |                                            |                    | Date<br><b>4/20/2024</b> |
| Signature of Officer/Authorized Representative<br><i>Sylvia Whiting</i>                                                                                                                                            |                 |                                                                                                                                                                                                                                                                                                                                      |                                            |                    |                          |

MAIL TO:  
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