



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. 000067285

2. Name of Corporation DANCE FOR ART, 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 [click here](#).

NAICS Code

624110

4. Principal Office Address

No. and Street: 1945 WARWICK AVENUE

City or Town: WARWICK

State: RI

Zip: 02889

Country: USA

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

TO PROMOTE, EDUCATE AND PERFORM ALL FORMS OF DANCE AND MUSIC FOR THE WELFARE OF THE PUBLIC.

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	Address
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
TREASURER	CHRYSSA MITCHELL	54 FAIRWOOD DRIVE CRANSTON, RI 02920 USA
DIRECTOR	JULIETTE DEROXAS	75 KIMBERLY LN N CRANSTON, RI 02921 USA
DIRECTOR	CAROLYN NORMA DUTRA	1945 WARWICK AVE WARWICK, RI 02889 USA
DIRECTOR	BLAIR-VICTORIA DUTRA	112 STANMORE ROAD WARWICK, RI 02889 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**

CHRYSSA MITECHLL 1945 WARWICK AVENUE WARWICK , RI 02889

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

**Signed this 30 Day of April, 2024 at 9:08:35 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 CHRYSSA MITCHELL  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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