



**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.** 001744929

**2. Name of Corporation** Hope Valley Elementary School PTO

**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  
813319

**4. Principal Office Address**

No. and Street: 15 THELMA DR  
City or Town: HOPE VALLEY State: RI Zip: 02832 Country: US

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

THE CORPORATION IS ORGANIZED AND WILL BE OPERATED EXCLUSIVELY FOR CHARITABLE AND EDUCATIONAL PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. SPECIFICALLY, THE CORPORATION IS ORGANIZED TO SUPPORT THE EDUCATION OF CHILDREN AT HOPE VALLEY ELEMENTARY SCHOOL BY FOSTERING RELATIONSHIPS BETWEEN THE SCHOOL, PARENTS AND TEACHERS. IN PURSUANCE OF THESE PURPOSES IT SHALL HAVE THE POWERS TO CARRY ON ANY BUSINESS OR OTHER ACTIVITY WHICH MAY BE LAWFULLY CONDUCTED BY A CORPORATION ORGANIZED UNDER THE RHODE

ISLAND CORPORATION ACT, WHETHER OR NOT RELATED TO THE FOREGOING PURPOSES, AND TO DO ALL THINGS NECESSARY, PROPER, AND CONSISTENT WITH MAINTAINING TAX-EXEMPT STATUS UNDER SECTION 501(C)(3).

**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
DIRECTOR	CHELSEA BAKER	139 SPRING ST HOPE VALLEY, RI 02832 USA
DIRECTOR	CHLOE MORGAN	88 SPRING ST HOPE VALLEY, RI 02832 USA
DIRECTOR	LEAH SOUSA	10 ANNA DR HOPE VALLEY, RI 02832 USA
DIRECTOR	STEPHANIE DAPONTE	9 MAPLE ST HOPE VALLEY, RI 02832 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**

CHELSEA BAKER 15 THELMA DR HOPE VALLEY , RI 02832

**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 11:27:35 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 CHELSEA BAKER  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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