	State of Rhode Office of the Secreta			
	Division Of Busines	s Services		
	148 W. River S	Street		
	Providence RI 029	04-2615		
7636	(401) 222-30)40		
Non-Profit Corporation Annual Report Filing Period: February 1				
	.L. 7-6-94, each corporation failing ime prescribed by law (R.I.G.L. 7-6	· · · · · · · · · · · · · · · · · · ·		
ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024				
1. Corporate ID No. 000027214				
2. Name of Corporation Beta Alpha Chapter of Delta Zeta Sorority House Corporation				
3. State of Incorporation				
State: <u>RI</u>				
	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>721310</u>				
4. Principal Office Add	ress			
No. and Street: 115	WOODBRIDGE DRIVE			
		State: <u>RI</u> Zip: <u>02818</u> Country: <u>USA</u>		
5. Brief Description of the Character of the Affairs Conducted in Rhode Island				
LEASE AND MANAGEMENT OF SORORITY HOUSE AT THE UNIVERSITY OF RHODE ISLAND				
6. Names and Address	es 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		

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	SARA ANDREOZZI	115 WOODBRIDGE DRIVE EAST GREENWICH, RI 02818 USA
SECRETARY	JOAN MEZZANOTE	11 WIGET STREET #3 BOSTON, MA 02113 USA
DIRECTOR	JILL MARSHALL	178 GLEN HILL DRIVE SAUNDERSTOWN, RI 02874 USA
DIRECTOR	PAMELA SANTOS	23 JODIE BETH DR EAST GREENWICH, RI 02818 USA
DIRECTOR	GIA SUNDERLAND	11 FLETCHER WAY NORTON, MA 02766 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

SARA ANDREOZZI 115 WOODBRIDGE DRIVE EAST GREENWICH , RI 02818

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

Signed this 16 Day of May, 2024 at 2:22:32 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 <u>SARA ANNE ANDREOZZI</u>

Signature of Authorized Person

Form No. 631 Revised 09/07

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