RI SOS Filing Number: 202455078580 Date: 5/30/2024 4:29:00 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. 001766096
- 2. Name of Corporation School of Government and Political Science 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 <u>click here.</u>

NAICS Code

813110

4. Principal Office Address

No. and Street: 38 CHAFFEE ST

City or Town: PROVIDENCE State: RI Zip: 02909 Country: USA

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

WE PROVIDED BIBLICAL, SPIRITUAL, ETHICAL, AND MORAL TRAINING TO A NEW GENERATION OF PUBLIC LEADERS, IN ORDER TO SERVE THEIR COUNTRY.

THIS ORGANIZATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, EDUCATIONAL,

RELIGIOUS AND/OR SCIENTIFIC PURPOSES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE

FEDERAL TAX

CODE, AND SHALL NOT INURE BENEFIT OR EARNINGS TO ANY PRIVATE SHAREHOLDER OR

INDIVIDUAL.

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
INCORPORATOR	MYNOR A. VARGAS	38 CHAFFEE ST PROVIDENCE, RI 02909-2712 USA
DIRECTOR	MYNOR A. VARGAS	38 CHAFFEE ST PROVIDENCE, RI 02909-2712 USA
DIRECTOR	BLANCA L. VARGAS	38 CHAFFEE ST PROVIDENCE, RI 02909-2712 USA
DIRECTOR	LUIS F. LEON	38 CHAFFEE ST PROVIDENCE, RI 02909-2712 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

MYNOR A. VARGAS 38 CHAFFEE ST PROVIDENCE, RI 02909-2712

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 May, 2024 at 4:31:18 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 MYNOR VARGAS

Signature of Authorized Person

Form No. 631 Revised 09/07

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