	State of Rhode Office of the Secre		Fee: \$20.00	
	Division Of Busine	ss Services		
	148 W. River			
1426	Providence RI 02			
1030	(401) 222-3	J40		
Non-Profit Corporation Annual Report				
Filing Period: February 1 - May	1			
In accordance with R.I.G.L. 7-6 annual report within the time pr penalty fee of \$25.00.				
ANNUAL REPORT YEAR - EN	TER THE CURRENT YEAR	2024 : <u>2024</u>		
1. Corporate ID No. <u>0007</u>	53340			
2. Name of Corporation <u>PMC</u>	<u>3 Charities, Inc.</u>			
3. State of Incorporation				
State: <u>RI</u>				
	NAICS CODE			
Using the dropdown labeled N primary type of activity in whic populate a NAICS Code based box on the right. For further as	ch your entity engages. The d on the chosen selection. I	box to the right of the the NAICS Code is ki	e dropdown will	
NAICS Code				
<u>624190</u>				
4. Principal Office Address				
No. and Street: <u>700 SCH</u>	OOL STREET			
City or Town: PAWTU	CKET Sta	e: <u>RI</u> Zip: <u>02860</u>	Country: <u>USA</u>	
5. Brief Description of the Ch	aracter of the Affairs Conc	ucted in Rhode Island	j	
SUPPORT AND CONDUCT	F PROGRAMS THAT PR	OVIDE ASSISTANC	CE TO NEEDY	
SUPPORT AND CONDUCT PROGRAMS THAT PROVIDE ASSISTANCE TO NEEDY INDIVIDUALS IN RHODE ISLAND				
6. Names and Addresses of t	he 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	Add	Iress	
			·	

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	RICHARD SANTILLI	8 ELIZABETH DRIVE LINCOLN, RI 02865 USA
SECRETARY	RAYMOND JORGENSEN	59 EASTWICK ROAD NORTH KINGSTOWN, RI 02852 USA
VICE PRESIDENT	ROBERT SKEFFINGTON	64 HIGH SERVICE AVE NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	RICHARD SANTILLI	8 ELIZABETH DRIVE LINCOLN, RI 02865 USA
DIRECTOR	RAYMOND JORGENSEN	59 EASTWICK ROAD NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	ROBERT SKEFFINGTON	64 HIGH SERVICE AVE NORTH PROVIDENCE, RI 02911 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

STEPHEN D. ZUBIAGO, ESQ. NIXON PEABODY LLP ONE CITIZENS PLAZA, SUITE 500 PROVIDENCE , RI 02903

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

Signed this 25 Day of June, 2024 at 8:00:52 AM 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>KYLE FALCAO</u>

Signature of Authorized Person

Form No. 631 Revised 09/07

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