



**State of Rhode Island
Office of the Secretary of State**

No Fee

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Domestic Non-Profit
Annual Report - Amended**

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-1.2-1501(e), 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.

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2024

1. Corporate ID No. 000074155

2. Name of Corporation Stadium Theatre Foundation

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

711110

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 28 MONUMENT SQUARE

City or Town: WOONSOCKET

State: RI Zip: 02895 Country: USA

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO ACQUIRE, RENOVATE, RESTORE, AND MANAGE THE STADIUM THEATRE.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3).

R.I.G.L.
7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	ARMAND DESMARAIS	57 MINERVA ST WOONSOCKET, RI 02895 US
TREASURER	THOMAS MATTOS	45 LINDEN ST ATTLEBORO, MA 02703 US
SECRETARY	CHRISTINA HARMON	97 GASKILL ST WOONSOCKET, RI 02895 US
VICE PRESIDENT	JONATHAN ROBERTS	111 EMERALD WAY N SCITUATE, RI 02857 US
DIRECTOR	DAVID SOUTHIERE	39 CLARENDON ST NEWTONVILLE, MA 02460 US
DIRECTOR	STEPHEN CASEY	625 PARK AVE WOONSOCKET, RI 02895 US
DIRECTOR	DAVID VALOIS	60A NARRAGANSETT AVE NARRAGANSETT, RI 02882 USA
DIRECTOR	ELIZABETH CATUCCI	23 SUPERIOR VIEW BLVD N PROVIDENCE, RI 02911 US
DIRECTOR	SEAN DAGESSE	6 ROBIN WAY N SMITHFIELD, RI 02896 US
DIRECTOR	FRANK DERCOLE	1 UPLAND DR NORTH ATTLEBORO, MA 02760 US
DIRECTOR	CATHY LEVESQUE	37 BELLINGHAM RD BLACKSTONE, MA 01504 US
DIRECTOR	DANIEL PELOQUIN	386 MOWRY ST WOONSOCKET, RI 02895 US
DIRECTOR	PATRICIA DUBOIS	14 RED CHIMENY DR LINCOLN, RI 02865 US
DIRECTOR	MARC TANCRELL	7 CAROL LN BLACKSTONE, MA 01504 US
DIRECTOR	LARRY POITRAS	958 MENDON RD WOONSOCKET, RI 02895 US
DIRECTOR	MARLENE MARSHALL	4 ARMAS CT CUMBERLAND, RI 02864 US
DIRECTOR	ROBERT MITSON	603 PARK AVE WOONSOCKET, RI 02895 US

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

ANNE CHOQUETTE 28 MONUMENT SQUARE WOONSOCKET , RI 02895

Signed this 27 Day of June, 2024 at 3:58:18 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 ANNE CHOQUETTE
Signature of Authorized Person

Form No. 631
Revised 09/07

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