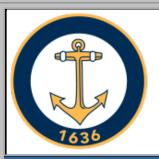
RI SOS Filing Number: 202457520320 Date: 7/1/2024 1:47:00 PM



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. <u>000030987</u>
- 2. Name of Corporation School One
- 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

<u>611110</u>

4. Principal Office Address

No. and Street: 220 UNIVERSITY AVE

City or Town: PROVIDENCE State: RI Zip: 02906 Country: USA

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

<u>HIGH SCHOOL SERVING GRADES 9-12 STUDENTS FROM THROUGHOUT RI AND SEMA.</u>

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	Address

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	KAREN WEAVILL	7 WAKE ROBIN RD. #312 LINCOLN, RI 02865 USA
TREASURER	JENNA MAYNARD	153 WOODHAVEN RD PAWTUCKET, RI 02861 USA
SECRETARY	DAVID PARR	67 ORIOLE AVENUE PROVIDENCE, RI 02906 USA
VICE PRESIDENT	RUTH FEDER	59 LARCH RD. EAST GREENWICH, RI 02818 USA
HEAD OF SCHOOL	CHRISTOPHER HAYES	50 SHEFFIELD AVE, NORTH PROVIDENCE, RI 02911 USA
ASSISTANT HEAD OF SCHOOL	CARY HONIG	864 HOPE ST. PROVIDENCE, RI 02906 USA
VICE PRESIDENT	DOUG BOONE	57 LORIMER AVE. PROVIDENCE, RI 02906 USA
DIRECTOR	SARI LITWIN	194 UNIVERSITY AVE PROVIDENCE, RI 02906 USA
DIRECTOR	WILLIAM WHITE	507 MENDON RD NORTH SMITHFIELD, RI 02896 USA
DIRECTOR	MARSHALL VALE	12 TWIN CIRCLE DR. ARLINGTON, MA 02474 USA
DIRECTOR	ALICIA LUZON	69 STONECLAW AVE PROVIDENCE, RI 02908 USA
DIRECTOR	KALI OTTO GENTRY	89 HOMER ST PROVIDENCE, RI 02905 USA
DIRECTOR	RUSSELL CAREY	63 DEXTERDALE RD. PROVIDENCE , RI 02906 USA
DIRECTOR	KAREN HOLLER	19 HARVARD ST. PAWTUCKET, RI 02860 USA
DIRECTOR	ERIKA SANTIL MOLDONADO	22 KENDALL LANE WARWICK, RI 02888 USA
DIRECTOR	YEIMY BAKEMON-MOREL	256 MASSACHUSETTS AVE. PROVIDENCE, RI 02905 USA
DIRECTOR	PAUL STEPNEY	85 MOLLIE DR. CRANSTON, RI 02921 USA
DIRECTOR	MARYANN ULLMANN	76 WOODBURY RD. CRANSTON, RI 02905 USA
DIRECTOR	ERIC FERRARA	96 WILBUR AVE. CRANSTON, RI 02920 USA
DIRECTOR	JILL FEDER	59 LARCH RD. EAST GREENWICH, RI 02818 USA
DIRECTOR	ALLISON FLEET	3 BELLMARE RD. COVENTRY , RI 02816 USA
DIRECTOR	LILA BOUTIN	12 UNIVERSITY AVE. #12 PROVIDENCE, RI 02906 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

DAVID KELLOGG 220 UNIVERSITY AVENUE PROVIDENCE, RI 02906

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

Signed this 1 Day of July, 2024 at 1:49:02 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 LIDA BROOKE

Signature of Authorized Person

Form No. 631 Revised 09/07

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