	State of Rhode Office of the Secret		
	<b>Division Of Busines</b>	ess Services	
	148 W. River S	Street	
	Providence RI 029		
1630	(401) 222-30	.040	
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 2	<b>2024</b> : <u>2024</u>	
<b>1. Corporate ID No.</b> <u>00166</u>	54085		
2. Name of Corporation <u>SMI</u>	THFIELD HIGH SCHOO	<u>DL MUSIC BOOSTER</u>	
3. State of Incorporation			
State: <u>RI</u>			
	NAICS CODE	Ξ	
primary type of activity in whic	ch your entity engages. The d on the chosen selection. If	he classification title that describes the e box to the right of the dropdown will If the NAICS Code is known, enter it into the assification <u>click here.</u>	
NAICS Code			
<u>813319</u>			
4. Principal Office Address			
No. and Street: 90 PLEAS	ANT VIEW AVENUE		
City or Town: <u>SMITHFIE</u>		State: <u>RI</u> Zip: <u>02917</u> Country: <u>USA</u>	
5. Brief Description of the Ch	aracter of the Affairs Cond	ducted in Rhode Island	
TO SUPPORT AND RAISE FUNDS FOR THE SMITHFIELD HIGH SCHOOL MUSIC			
		RSHIP FUND FOR MUSIC STUDENTS.	
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	Address	

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	MELISSA J MORONI	1 EAST PROSPECT STREET SMITHFIELD, RI 02917 USA
TREASURER	MARY ELLEN CONNOLLY- FOCHLER	29 HILLCREST AVENUE SMITHFIELD, RI 02828 USA
SECRETARY	KERI FERREIRA	934 GREENVILLE AVENUE SMITHFIELD, RI 02828 USA
VICE PRESIDENT	PAUL DUHAMEL	51 EAST LANTERN ROAD SMITHFIELD, RI 02917 USA
DIRECTOR	RACHEL GLATZ	28 FARNUM PIKE SMITHFIELD, RI 02917 USA
DIRECTOR	MELISSA J MORONI	1 EAST PROSPECT STREET SMITHFIELD, RI 02917 USA
DIRECTOR	PAUL DUHAMEL	51 LANTERN ROAD SMITHFIELD, RI 02917 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

MICHAELA TURBITT 90 PLEASANT VIEW AVENUE SMITHFIELD , RI 02917

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

**Signed this 12 Day of August, 2024 at 1:15:34 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>MELISSA J MORONI</u> Signature of Authorized Person

Form No. 631 Revised 09/07

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