

**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 2025: 2025**1. Corporate ID No.** 000074035**2. Name of Corporation** Jamestown Parent Teacher Organization**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 [click here](#).

NAICS Code

813990**4. Principal Office Address**No. and Street: 76 MELROSE AVECity or Town: JAMESTOWNState: RIZip: 02835Country: USA**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**TO PROMOTE THE BEST INTEREST OF THE CHILDREN IN HOME AND SCHOOL
THRU COOPERATION OF FAMILY AND TEACHERS.**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
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	LOREN BRAUNHOLER	24 BRYER AVE JAMESTOWN, RI 02835 US
TREASURER	ELIZABETHQ COLEMAN	8 MEADOW LANE JAMESTOWN, RI 02835 USA
DIRECTOR	KATIE ROY	11 HULL ST JAMESTOWN, RI 02835 US
DIRECTOR	ELIZABETH COLEMAN	8 MEADOW LANE JAMESTOWN, RI 02835 USA
DIRECTOR	LIV SCOTT	80 COLUMBIA LANE JAMESTOWN, RI 02835 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

MAUREEN GLADDING 86 COLUMBIA LANE JAMESTOWN , RI 02835

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

Signed this 13 Day of November, 2024 at 2:33:51 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 ELIZABETH COLEMAN
Signature of Authorized Person

Form No. 631
Revised 09/07

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