



**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. 000143124

2. Name of Corporation AUREA

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

711130

4. Principal Office Address

No. and Street: 195 SESSIONS STREET

City or Town: PROVIDENCE

State: RI

Zip: 02906

Country: USA

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

TO INVESTIGAGE AND INVIGORATE THE RELATIONSHIP BETWEEN MUSIC AND THE SPOKEN WORD

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	RENA ABELES	555 LLOYD AVE. PROVIDENCE, RI 02906 USA
SECRETARY	FRANCES TRAFTON	13 CONSTITUTION HILL PROVIDENCE, RI 02904 US
VICE PRESIDENT/TREASURER	AMY GOLDSTEIN	195 SESSIONS ST. PROVIDENCE, RI 02906 US
DIRECTOR	BRENDA K GAYNOR	83 UNIVERSITY AVE #2 PROVIDENCE, RI 02906 USA
DIRECTOR	JORDAN VERNER	74 MOUNTAIN AVE RIVERSIDE, RI 02915 US
DIRECTOR	PETER ALLEN	44 ORIOLE AVE. PROVIDENCE, RI 02906 US

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

AMY M. GOLDSTEIN 195 SESSION STREET 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 6 Day of February, 2025 at 1:54:05 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 AMY GOLDSTEIN
Signature of Authorized Person

Form No. 631
Revised 09/07

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