



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. 001715979

2. Name of Corporation ONE LOVE PROVIDENCE INC

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

611620

4. Principal Office Address

No. and Street: 45 LINDEN ROAD

City or Town: BARRINGTON

State: RI

Zip: 02806

Country: US

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

FOR KIDS TO LEARN TENNIS AND GET TUTORING SUPPORT

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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
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PRESIDENT	NESTOR BERNABE	45 LINDEN ROAD BARRINGTON, RI 02806 USA
DIRECTOR	BLAISEDEL FRAMPTON	12 OLD WEST WRENTHAM ROAD CUMBERLAND, RI 02864 USA
DIRECTOR	DAVID M CIAMPI	2278 WATERBURY RD CHESHIRE, CT 06410 USA
DIRECTOR	ALECIA DEANGELIS	2278 WATERBURY CHESHIRE, CT 06410 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**

NESTOR BERNABE 84 SAVOY 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 13 Day of February, 2025 at 4:30:17 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 NESTOR BERNABE
Signature of Authorized Person

Form No. 631
Revised 09/07

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