



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2025

Non-Profit Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED

MAR 03 2025

BY

1. Entity ID Number 000028689		2. Exact name of the Corporation The Providence Radio Association, Incorporated			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island Amateur Radio: An Association relative to the art and science of radio communications.			
4. NAICS Code 515111					
6. Principal Office Address Richard Mancini; 124 Rome Drive		City Cranston		State RI	Zip 02921
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name David Steussie			Vice-President Name Edward Casassa		
Street Address 77 Winchester Drive			Street Address PO Box 2112		
City North Scituate	State RI	Zip 02857	City Providence	State RI	Zip 02905
Secretary Name Robert Hart			Treasurer Name Richard Mancini		
Street Address 16 Edgewood Ave.			Street Address 124 Rome Drive		
City Cranston	State RI	Zip 02905	City Cranston RI	State 02921	Zip
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment ☐					
Director Name Gil Brown			Director Name Rocco Quattrucci		
Street Address 3048 PAwtucket Avenue, Apt. 107			Street Address 49 Richfield Ave		
City Riverside	State RI	Zip 02915	City East Providence	State RI	Zip 02914
Director Name Andrew Stenberg			Director Name		
Street Address 526 North Road			Street Address		
City Sunapee	State NH	Zip 03782	City	State	Zip
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.					
Name of Officer/Authorized Representative DAVID STEUSSIE - PRESIDENT					Date 2/26/2025
Signature of Officer/Authorized Representative 					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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