



**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.** 000797692

**2. Name of Corporation** Sheila C. Skip Nowell Leadership Academy

**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

611110

**4. Principal Office Address**

No. and Street: 150 WASHINGTON STREET

City or Town: PROVIDENCE

State: RI

Zip: 02903

Country: USA

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

TO OPERATE A CHARTER SCHOOL PURSUANT TO TITLE 16 OF THE RHODE ISLAND  
GENERAL LAWS

**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
-------	-----------------	---------

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	LAROME MYRICK	57 POWER ROAD CRANSTON, RI 02920 USA
TREASURER	EASTON DICKSON	174 BURNT SWAMP RD CUMBERLAND, RI 02864 USA
SECRETARY	ROSE ALBERT	17 CROSS STREET MANVILLE, RI 02838 USA
CEO	JESSICA WATERS	150 WASHINGTON STREET PROVIDENCE, RI 02903 USA
VICE PRESIDENT	SULINA MOHANTY	45 SAW MILL DRIVE UNIT 304 NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	JENNIFER GRIFFITH	65 PLYMOUTH ROAD EAST PROVIDENCE, RI 02914 USA
DIRECTOR	CARLOS RAMIREZ	15 SHERMAN AVENUE CUMBERLAND, RI 02864 USA
DIRECTOR	CLAUDETTE BANNERMAN	70 NASHUA ST #2 PROVIDENCE, RI 02904 USA
DIRECTOR	JUAN CARTER	3 SWEETBRIAR ROAD BARRINGTON, RI 02904 USA
DIRECTOR	TERESA JENKINS	150 WASHINGTON ST PROVIDENCE, RI 02903 USA
DIRECTOR	SHANNON MASSAROCCO	101 WALNUT ST EAST PROVIDENCE, RI 02914 USA
DIRECTOR	MISTY DELGADO	PO BOX 114358 NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	TAHON ROSS	35 LAKESIDE ST PROVIDENCE, RI 02904 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**

LAROME MYRICK 150 WASHINGTON ST PROVIDENCE , RI 02903

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

**Signed this 5 Day of March, 2025 at 2:55:45 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 JESSICA WATERS  
Signature of Authorized Person

Form No. 631  
Revised 09/07

© 2007 - 2025 State of Rhode Island  
All Rights Reserved