



**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. 001744010

2. Name of Corporation Dance Synergy Booster Club

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: 16 STANDISH AVENUE

City or Town: PROVIDENCE

State: RI

Zip: 02908

Country: USA

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

TO FUNDRAISE TO HELP PAY FOR THEIR DANCE COMPETITION FEES AND COST

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	SHIRLEY MARRERO	87 ARTHUR ST APT 5 PAWTUCKET , RI 02860 USA
VICE PRESIDENT	HAILEY ARNESON	55 BANCROFT ST PROVIDENCE , RI 02909 USA
DIRECTOR	JACKELYN MELENDEZ	16 STANDISH AVENUE PROVIDENCE, RI 02908 USA
DIRECTOR	PAIGE LAMA	349 PLEASANT STREET PAWTUCKET, RI 02860 USA
DIRECTOR	JENNA WOYMAR	26 PATRIOT ST ATTLEBORO, MA 02703 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**

JOELY BIENKOWSKI 16 STANDISH AVENUE PROVIDENCE , RI 02908

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

Signed this 19 Day of March, 2025 at 10:16:18 AM 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 JACKELYN MELENDEZ
Signature of Authorized Person

Form No. 631
Revised 09/07

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