



**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.** 001781640

**2. Name of Corporation** Friends of Troop 66 Garden City

**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

624110

**4. Principal Office Address**

No. and Street: 97 HILLTOP DR

City or Town: CRANSTON State: RI Zip: 02920 Country: USA

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

HIS CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE AND  
EDUCATIONAL  
PURPOSES, INCLUDING, FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS  
TO  
ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS UNDER SECTION  
501(C)(3) OF  
THE INTERNAL REVENUE CODE OR THE CORRESPONDING SECTION OF ANY  
FUTURE FEDERAL

TAX CODE, SPECIFICALLY, FOR THE PURPOSES OF FURTHERING THE SCOUTS LEARNING AND ACTIVITIES BY FUNDRAISING TO SUPPORT TROOP 66 GARDEN CITY.

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
INCORPORATOR	STACY DICOLA	31 GLEN RD. CRANSTON, RI 02920 USA
DIRECTOR	JOSHUA MACOMBER	46 PIMENTAL DR. SEEKONK, MA 02771 USA
DIRECTOR	ALAN ARTHUR DEPALO	65 WARREN AVE. CRANSTON, RI 02920 USA
DIRECTOR	KATHLEEN S. CAITO	97 HILLTOP DR. CRANSTON, RI 02920 USA
DIRECTOR	STACY DICOLA	31 GLEN RD. CRANSTON, RI 02920 USA
DIRECTOR	DAVID SHERMAN	238 CARPENTER RD. CRANSTON, RI 02920 USA
DIRECTOR	JEFFREY GOLDTHWAIT	27 HOFFMAN AVE CRANSTON, RI 02920 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

STEVEN PARENTEAU 115 CONCORD AVE. CRANSTON , RI 02920

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

Signed this 10 Day of April, 2025 at 8:04:26 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 JEFFREY GOLDTHWAIT  
Signature of Authorized Person

© 2007 - 2025 State of Rhode Island  
All Rights Reserved