



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. 000026621

2. Name of Corporation The League of Women Voters of Providence

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

813319

4. Principal Office Address

No. and Street: 1 RICHMOND SQUARE

City or Town: PROVIDENCE

State: RI

Zip: 02906

Country: USA

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

THE PROMOTION OF PUBLIC INVOLVEMENT IN GOVERNMENT AND PUBLIC INFORMATION ABOUT GOVERNMENT.

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
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	ELISABETH HEAD	603 ANGELL STREET PROVIDENCE, RI 02906 US
TREASURER	DIANA DOYLE	125 HOPE ST. PROVIDENCE, RI 02906 USA
SECRETARY	MAUREEN ROMANS	324 MT PLEASANT AVE PROVIDENCE, RI 02908 US
DIRECTOR	BARBARA FELDMAN	30 PRESIDENT AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	MARTHA FRUTCHEY	49 HUMBOLDT AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	MAUREEN ROMANS	324 MT. PLEASANT AVE. PROVIDENCE, RI 02908 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

HOLLIE U. COURAGE 437 LLOYD AVENUE 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 17 Day of May, 2025 at 2:49:03 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 DIANA DOYLE
Signature of Authorized Person

Form No. 631
Revised 09/07

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