



State of Rhode Island
Department of State - Business Services Division

FILED

NOV 17 2021

BY 1032

Annual Report for the year: 2021
Non-Profit Corporation

- Filing period: June 1 - June 30
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number 000026052		2. Exact name of the Corporation DANTE ALIGHIERA SOCIAL CLUB			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Social Club			
4. NAICS Code 722410					
6. Principal Office Address 43 Ransdon Avenue			City Pawtucket	State RI	Zip 02861
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Jean B Vital			Vice-President Name Marcus Vital		
Street Address 43 Ransdon Ave			Street Address 43 Ransdon Ave		
City Pawt	State RI	Zip 02861	City Pawt	State RI	Zip 02861
Secretary Name Marcus Vital Jr.			Treasurer Name Jean B Vital		
Street Address 39 Oak Ave			Street Address 43 Ransdon Ave		
City S. Att	State MA	Zip 02860	City Pawt.	State RI	Zip 02861
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Jean Vital			Director Name Marcus Vital		
Street Address 43 Ransdon Ave			Street Address 43 Ransdon Ave		
City Pawt.	State RI	Zip 02861	City Pawt.	State RI	Zip 02861
Director Name Marcus Vital Jr.			Director Name		
Street Address 39 Oak Ave			Street Address		
City S. Att	State MA	Zip 02703	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.					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative Jean B Vital					Date 11/14/2021
Signature of Officer/Authorized Representative Jean B Vital					