RI SOS Filing Number: 202327206170 Date: 2/1/2023 4:50:00 PM



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

Foreign Non-Profit 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: 2023

- 1. Corporate ID No. 000315837
- 2. Name of Corporation Arts Are Essential, Inc.
- 3. State of Incorporation

State: MA

ARTICLE III

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 <u>click here.</u>

NAICS Code

711410

4. Principal Office Address

No. and Street: <u>144 SCHOOL ST.</u>

City or Town: <u>ACTON</u> State: <u>MA</u> Zip: <u>01720</u> Country: <u>USA</u>

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

TO COLLABORATE WITH EDUCATORS AND ARTISTS TO BRING ART EXPERIENCES TO STUDENTS THAT ENRICH AND EDUCATE

6. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country

PRESIDENT	JEAN BUTLER	144 SCHOOL ST. ACTON, MA 01720 USA
TREASURER	ROSIE LATTO	4 MOHEGAN RD ACTON, MA 01720 USA
CLERK	NEAL R. BUTLER	144 SCHOOL ST. ACTON, MA 01720 USA
DIRECTOR	SANDY BEAN	451 MAIN ST. ACTON, MA 01720 USA
DIRECTOR	RANJINI REDDY	2 HOSMER ST. ACTON, MA 01720 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

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST PROVIDENCE, RI 02914

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

Signed this 1 Day of February, 2023 at 4:52:27 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 JEAN BUTLER

Signature of Authorized Person

Form No. 631 Revised 09/07

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