



**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: 2023

1. Corporate ID No. 000027361

2. Name of Corporation Kappa Rho Association of Phi Gamma Delta

3. State of Incorporation

State: RI

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 [click here](#).

NAICS Code
611310

4. Principal Office Address

No. and Street: 117 WEST ALUMNI AVENUE

City or Town: KINGSTON

State: RI Zip: 02881 Country: USA

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

FRATERNAL ORGANIZATION

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	ROBERT W MARSHALL	639 CENTRAL AVENUE PAWTUCKET, RI 02861 USA
SECRETARY	MATTHEW CHUDY	23 FAIRWAY DR BARRINGTON, RI 02806 USA
DIRECTOR	RYAN ELSMORE	30 CHURCH STREET APT 5 BRAintree, MA 02184 USA
DIRECTOR	CYRUS AGARABI	5411 MCGRATH BLVD NORTH BETHESDA, MD 20852 USA
DIRECTOR	WILLIAM MCGRATH	11 OSAGE ROAD CANTON, MA 02021 USA
DIRECTOR	RICHARD KINGSLEY	85 CLINTON AVE JAMESTOWN, RI 02835 USA
DIRECTOR	KENT STEPANISHEN	77 CRESTWOOD ROAD WEST HARTFORD, CT 06107 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

MATTHEW E CHUDY 23 FAIRWAY DR BARRINGTON , RI 02806

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

Signed this 9 Day of March, 2023 at 8:47:52 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 MATTHEW E CHUDY
Signature of Authorized Person

Form No. 631
Revised 09/07

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