


**Department of State - Business Services Division**

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 R.I. DEPT. OF STATE  
 BUSINESS SERVICES DIVISION

2023 MAY 31 AM 11:28

**Annual Report for the year:** 2023  
**Non-Profit Corporation**

- Filing period: February 1 - May 1
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number <b>001725838</b>		2. Exact name of the Corporation <b>Juneteenth RI</b>			
3. State of Incorporation <b>Rhode Island</b>		5. Brief description of the character of business conducted in Rhode Island <b>Statewide celebration of Juneteenth</b>			
4. NAICS Code <b>813319 - Other Social Advoca</b>					
6. Principal Office Address <b>199 Camp Street</b>			City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Helen Baskerville-Dukes</b>			Vice-President Name <b>Pamela C Hughes</b>		
Street Address <b>135 Camp Street</b>			Street Address <b>21 Peach Avenue</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>
Secretary Name <b>Jill Van Leesten</b>			Treasurer Name <b>Michelle D Lacey</b>		
Street Address <b>162 Robinson Avenue</b>			Street Address <b>15 Gallup Street</b>		
City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02861</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02905</b>
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Keiojfa Hie</b>			Director Name <b>Heather Strother</b>		
Street Address <b>203 Bucklin Street</b>			Street Address <b>270 Willard Avenue</b>		
City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02861</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02907</b>
Director Name <b>Lydia Angel Cooper</b>			Director Name <b>April Samuels</b>		
Street Address <b>Commodore Street</b>			Street Address <b>199 Camp Street</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
<b>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.</b>					
<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 <b>Helen Baskerville-Duke President</b>				Date <b>5/30/23</b>	
Signature of Officer/Authorized Representative 				<b>FILED</b>	

**MAIL TO:**  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

**MAY 31 2023**  
**BY ML 9B15A**