RI SOS Filing Number: 202449645970 Date: 3/28/2024 10:26:00 AM



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 2024: 2024

- 1. Corporate ID No. <u>001658833</u>
- 2. Name of Corporation The Collaborative
- 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 <u>click here.</u>

NAICS Code

711510

4. Principal Office Address

No. and Street: 4 MARKET STREET

City or Town: WARREN State: RI Zip: 02885 Country: USA

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

THE ORGANIZATION IS EXCLUSIVELY ORGANIZED AS A NONPROFIT GROUP UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE, TO PROVIDE AN ENVIRONMENT FOR LOCAL ARTISTS THAT SUPPORTS, PROMOTES AND ENCOURAGES CREATIVITY AND INSPIRATION BY FACILITATING INCREASED EXPOSURE AND OPPORTUNITIES THROUGH WORK SPACE, EXHIBITION, AND WEB PRESENCE.

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
TREASURER	TAMARA KAPLAN	68 KING ST WARREN, RI 02885 USA
SECRETARY	ALANA CONLIN	44 WILLIAMS ST LINCOLN, RI 02865 USA
DIRECTOR	DEBORAH COURY	165 TOUISSET RD WARREN, RI 02885 USA
DIRECTOR	ERNEST EDWARDS JR	502 MAIN ST. WARREN, RI 02885 USA
DIRECTOR	SALLY V TURNER	37 N CORNELL AVE WARREN, RI 02885 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

SALLY TURNER 4 MARKET STREET WARREN, RI 02885

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

Signed this 28 Day of March, 2024 at 10:30:12 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 **SALLY TURNER**

Signature of Authorized Person

Form No. 631 Revised 09/07

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