



State of Rhode Island and Providence Plantations
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: June 1 - June 30

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: 2012

1. Corporate ID No. 000119805

2. Name of Corporation Friends of SRIMS, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: QUEST MONTESSORI SCHOOL
1157 SOUTH ROAD

City or Town: WAKEFIELD State: RI Zip: 02879 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO ESTABLISH A REGIONAL SCHOOL TO PROVIDE EDUCATIONAL AND CHILD CARE SERVICES FOR CHILDREN

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	ELISA CARDONE	15 JUNIPER DRIVE WICKFORD, RI 02813 USA
TREASURER	AMY SMITH	50 FAIRFIELD DRIVE

		NORTH KINGSTOWN, RI 02852 USA
SECRETARY	MATTHEW PATRICK DAILY	80 ALBERT STREET PORTSMOUTH, RI 02871 USA
CEO	PAUL CROSSLAND RAYMOND	1215 WORDENS POND ROAD CHARLESTOWN , RI 02813 USA
DIRECTOR	DON RAMOS	40 NEWTOWN AVE WICKFORD, RI 02852 USA
DIRECTOR	KHALIL HABIB	75 WILLET ROAD SAUNDERSTOWN, RI 02874 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

LISA DIPIPPO 70 PLEASANT STREET WICKFORD , RI 02852

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver, or Trustee.

Signed this 8 Day of November, 2012 at 9:38:31 AM. *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 corporation, 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 P. DAILY
Signature of Officer of the Corporation

President or Vice President or Secretary or Assistant Secretary or

Treasurer or Receiver or Trustee (check one)

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.

Form No. 631
Revised 09/07

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