



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **2014**

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 93959		2. Exact name of the Corporation Rhode Island KIDS COUNT, Inc.			
3. State of Incorporation Rhode Island		4. Brief description of the character of business conducted in Rhode Island To collect and disseminate accurate information about children.			
5. Principal office address One Union Station		City Providence	State RI	Zip 02903	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
President Name Victor F. Capellan		Vice-President Name William Hollinshead, M.D.			
Street Address 32 Parkside Drive		Street Address 122 Martin Street			
City Providence	State RI	Zip 02910	City Rehoboth	State MA	Zip 02769
Secretary Name Maxine Richman		Treasurer Name Raymond Celona, CPA			
Street Address 9 Strawberry Drive		Street Address 155 South Main Street, Suite 100			
City Barrington	State RI	Zip 02806	City Providence	State RI	Zip 02903
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) ☒					
Director Name Manuela Raposo		Director Name Linda H. Newton			
Street Address P.O. Box 40923		Street Address 45 Larch Street			
City Providence	State RI	Zip 02940	City Providence	State RI	Zip 02906
Director Name Marisa Quinn		Director Name Amy Goldberg, M.D.			
Street Address P.O. Box 1920		Street Address 593 Eddy Street			
City Providence	State RI	Zip 02912	City Providence	State RI	Zip 02903
8. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

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

FILED

JUN 12 2014

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.

Elizabeth Burke Bryant June 5, 2014
Signature of Officer or Authorized Representative Date

Elizabeth Burke Bryant, Executive Director

Print or Type Name of Officer or Authorized Representative

Rhode Island KIDS COUNT, Inc.
Corporate ID No. 93959

**NAMES AND ADDRESSES OF THE DIRECTORS
(ATTACHMENT)**

Reverend Matthew N. Kai
134 Bridgham Street
Providence, RI 02909

Barbara Silvis
P.O. Box 7500
Johnston, RI 02919

FILED
JUN 12 2014
BY TD 93959