



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

**Foreign Non-Profit
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: 2014

1. Corporate ID No. 000798593

2. Name of Corporation Achievement First, Inc.

3. State of Incorporation

State: CT

4. Corporate Address in Rhode Island

No. and Street: 370 HARTFORD AVENUE

City or Town: PROVIDENCE

State: RI Zip: 02909 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

MANAGEMENT COMPANY TO PROVIDE SERVICES RELATIVE TO THE OPERATION OF CHARTER SCHOOLS

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
CHAIRMAN	WILLIAM BERKLEY	475 STEAMBOAT ROAD GREENWICH, CT 06830 USA
DIRECTOR	DOUG BORCHARD	2 CANAL PARK CAMBRIDGE, MA 02141 USA
DIRECTOR	ARIELA ROZMAN	186 JORALEMON ST., SUITE 300 BROOKLYN, NY 11201 USA
DIRECTOR	ELISA VILLANUEVA BEARD	TWO GREENWAY PLAZA, SUITE 500

		HOUSTON, TX 77046 USA
DIRECTOR	JON D SACKLER	ONE STAMFORD FORUM, 201 TRESSER BOULEVARD STAMFORD, CT 06901 USA
DIRECTOR	JAMES PEYSER	211 CONGRESS STREET 10TH FLOOR, BOSTON, MA 02110 USA
DIRECTOR	CARLTON HIGHSMITH	7 LAUREL SQUARE PARK 3190 WHITNEY AVE. HAMDEN, CT 06518 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**

HASLAW, INC. HINCKLEY ALLEN & SNYDER LLP 50 KENNEDY PLAZA, SUITE 1500 PROVIDENCE ,
RI 02903

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

*Signed this 25 Day of July, 2014 at 12:18:19 PM 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 D SCOT KERR
Signature of Authorized Person

Form No. 631
Revised 09/07

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