



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:** 2016

**1. Corporate ID No.** 000599837

**2. Name of Corporation** ColinsLaw.org, Inc.

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 143 HAMILTON AVENUE

City or Town: JAMESTOWN

State: RI Zip: 02835 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 PROVIDE EDUCATION AND AWARENESS TO THE PUBLIC REGARDING SAFE DRIVING TRAFFID REGULATIONS AND INVESTIGATE NEW AND IMPROVED TRAFFIC CONTROL TECHNOLOGY

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	ROBIN A FOOTE	143 HAMILTON AVE JAMESTOWN, RI 02835 USA
DIRECTOR	ROBIN A FOOTE	143 HAMILTON AVE

		JAMESTOWN, RI 02835 USA
DIRECTOR	MARYANN B FOOTE	143 HAMILTON AVE JAMESTOWN, RI 02835 USA
DIRECTOR	PETER LEGNOS	973 NORTH RD GROTON, CT 06340 USA
DIRECTOR	LISA DOUCET	14 FASHION DRIVE WARWICK, RI 02886 USA
DIRECTOR	BARRY SALUK	17 SKIFF LANE MYSTIC, CT 06355 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**

ROBIN A. FOOTE 143 HAMILTON AVENUE JAMESTOWN , RI 02835

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

**Signed this 2 Day of June, 2016 at 1:41:29 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 RICHARD FOOTE  
Signature of Authorized Person

Form No. 631  
Revised 09/07