



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: 2016

1. Corporate ID No. 001100104

2. Name of Corporation Great Schools Partnership, Inc.

3. State of Incorporation

State: ME

4. Corporate Address in Rhode Island

No. and Street: 482 CONGRESS STREET, SUITE 500

City or Town: PORTLAND

State: RI Zip: 04101 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

EDUCATIONAL CONSULTATION AND SUPPORT FOR RHODE ISLAND PUBLIC 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
PRESIDENT	BETSY STIVERS	482 CONGRESS STREET, SUITE 500 PORTLAND, ME 04101 USA
TREASURER	DAN COYNE	482 CONGRESS ST. SUITE 500 PORTLAND, ME 04101 USA
CEO	DAVID J. RUFF	482 CONGRESS ST. SUITE 500 PORTLAND, ME 04101 USA
MEMBER	SARAH HELMING STERN	482 CONGRESS ST. SUITE 500

		PORTLAND, ME 04101 USA
VICE PRESIDENT	FRANK J. GOVERNALI	482 CONGRESS ST. SUITE 500 PORTLAND, ME 04101 USA
MEMBER	TIMOTHY P. AGNEW	482 CONGRESS ST. SUITE 500 PORTLAND, ME 04101 USA
MEMBER	RON BANCROFT	482 CONGRESS ST. SUITE 500 PORTLAND, ME 04101 USA
MEMBER	SEAN T. FINDLEN	482 CONGRESS ST. SUITE 500 PORTLAND, ME 04101 USA
MEMBER	CARY OLSON-CARTWRIGHT	482 CONGRESS ST. SUITE 500 PORTLAND, ME 04101 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**

NORTHWEST REGISTERED AGENT, LLC. ONE RICHMOND SQUARE, SUITE 125B PROVIDENCE ,  
RI 02905

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

**Signed this 29 Day of June, 2016 at 5:02:11 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 DAVID J. RUFF  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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