



**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: 2017

1. Corporate ID No. 000119805

2. Name of Corporation Friends of SRIMS, Inc.

3. State of Incorporation

State: RI

ARTICLE III

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

611110

4. Corporate Address in Rhode Island

No. and Street: QUEST MONTESSORI SCHOOL
1150 BOSTON NECK RD.

City or Town: NARRAGANSETT State: RI Zip: 02882 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Incorporator is no longer applicable; please delete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	TOLGA KOKTURK	27 NORTHUP RD COVENTRY, RI 02816 USA
TREASURER	JUSTIN SHULL	5 GOOSEBURY RD. NEWPORT, RI 02840 USA
SECRETARY	AMY SMITH	50 FAIRFIELD DRIVE NORTH KINGSTOWN, RI 02852 USA
HEAD OF SCHOOL	MICHAEL BARCLAY	170 CHAMPLAIN RD. SAUNDERSTOWN, RI 02874 USA
VICE PRESIDENT	MARSHALL VOTTA	116 PINE TREE CIRCLE NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	CLAIRE HALL	55 SUNSET BLVD NARRAGANSETT, RI 02882 USA
DIRECTOR	JULIA GERALD	897 EAST SHORE RD. JAMESTOWN, RI 02835 USA
DIRECTOR	MARC SHERMAN	190 EDGEWOOD FARM RD. WAKEFIELD, RI 02879 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**

MICHAEL BARCLAY QUEST MONTESSORI SCHOOL 1150 BOSTON NECK ROAD NARRAGANSETT ,
RI 02882

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

Signed this 24 Day of May, 2017 at 2:45:02 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 JAMIE MARTIN
Signature of Authorized Person

Form No. 631
Revised 09/07

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