



**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. 000101116

2. Name of Corporation New England Graduate Accounting Study Conferences, 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
813920

4. Corporate Address in Rhode Island

No. and Street: 48 HAMILTON FARM ROAD
City or Town: NORTH KINGSTOWN State: RI Zip: 02852 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 ENCOURAGE THE CONTINUING STUDY OF ACCOUNTANCY BY PUBLIC ACCOUNTANTS AND CERTIFIED PUBLIC ACCOUNTANTS.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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 | MICHAEL NICHESON CPA | 69 LINCOLNVILLE AVE PO BOX 211 BELFAST, ME 04915 USA |
| VICE PRESIDENT | THOMAS GRENNAN CPA | 2850 SOUTH COUNTY TRAIL EAST GREENWICH, RI 02818 USA |
| DIRECTOR | DEWEY W MARTIN CPA | 575 MEADOW ROAD HAMPDEN, ME 04444 USA |
| SECRETARY | TERESA KAJENSKI CPA | 143 BARRE STREET MONTPELIER, VT 05602 USA |
| DIRECTOR | JUDITH P HIGGINS CPA | 151 PUTNAM PIKE JOHNSTON, RI 02919 USA |
| TREASURER | HENRY M SACCOCCIA CPA | 48 HAMILTON FARM ROAD NORTH KINGSTOWN, RI 02852 USA |
| DIRECTOR | MARGE SKIDMORE CPA | 140 WESTERLY TERRACE COLCHESTER, CT 06415 USA |
| DIRECTOR | ROBIN WELLS CPA | 3 N SPRING STREET STE 100 CONCORD, NH 03301 USA |
| DIRECTOR | SONDI STANTON CPA | 300 WILDWOOD AVE STE 250 WOBURN, MA 01810 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**

HENRY M. SACCOCCIA 48 HAMILTON FARM ROAD NORTH KINGSTOWN , RI 02852

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 May, 2017 at 4:27:48 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 HENRY SACCOCCIA
Signature of Authorized Person

Form No. 631
Revised 09/07