



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

**Annual Report for the year: 2017**

**Non-Profit Corporation**

- Filing period: June 1 - June 30
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by July 30.

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 R.I. DEPT. OF STATE  
 BUS. SVCS. DIV.

1. Entity ID Number <b>1658658</b>		2. Exact name of the Corporation <b>Newport Partnership for Families</b>			
3. State of Incorporation <b>Rhode Island</b>		4. Brief description of the character of business conducted in Rhode Island <b>A widely recognized network of collaborating partners.</b>			
5. Principal Office Address <b>109 Old Fort Road</b>		City <b>Newport</b>	State <b>RI</b>	Zip <b>02840</b>	
6. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Chairman - Keith Tavares - C&amp;F Services</b>		Vice-President Name <b>Vice Chairman - Marilyn Warren - MLKC</b>			
Street Address <b>31 John Clarke Road</b>		Street Address <b>20 Dr. Marcus Wheatland Boulevard</b>			
City <b>Middletown</b>	State <b>RI</b>	Zip <b>02842</b>	City <b>Newport</b>	State <b>RI</b>	Zip <b>02840</b>
Secretary Name <b>Candace Powell</b>		Treasurer Name <b>Tia Scigulinsky</b>			
Street Address <b>38 Mt. Hope Avenue</b>		Street Address <b>368 Sea Meadow Drive</b>			
City <b>Jamestown</b>	State <b>RI</b>	Zip <b>02835</b>	City <b>Portsmouth</b>	State <b>RI</b>	Zip
7. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Keith Tavares, Director and Chairman</b>		Director Name <b>Sharon K. Carter, Director NPFF</b>			
Street Address <b>31 John Clarke Road</b>		Street Address <b>109 Old Fort Road</b>			
City <b>Middletown</b>	State <b>RI</b>	Zip <b>02842</b>	City <b>Newport</b>	State <b>RI</b>	Zip <b>02840</b>
Director Name <b>Marilyn Warren, Director and Vice Chair</b>		Director Name			
Street Address <b>20 Dr. Marcus Wheatland Boulevard</b>		Street Address			
City <b>Newport</b>	State <b>RI</b>	Zip <b>02840</b>	City	State	Zip
8. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</b>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative <b>Tia Scigulinsky</b>				Date <b>June 7, 2017</b>	
Signature of Officer/Authorized Representative <span style="float: right; margin-left: 20px;">SIGN DOCUMENT HERE</span>					

**MAIL TO:**  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

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