



**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. 000791094

2. Name of Corporation Protect Families First

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
813319

4. Corporate Address in Rhode Island

No. and Street: 72 ARNOLD ST.
City or Town: PROVIDENCE State: RI Zip: 02906 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

THE MISSION OF PROTECT FAMILIES FIRST IS TO ADVOCATE FOR PROGRESSIVE CHANGE AND TO RAISE PUBLIC AWARENESS ABOUT ISSUES THAT AFFECT RHODE ISLAND YOUTH AND FAMILIES. BY PROMOTING PROGRAMS AND POLICIES THAT FOSTER FAMILY WHOLENESS, HAPPINESS, AND HEALTH, WE ARE A GRASSROOTS ORGANIZATION DEDICATED TO WORKING WITH COMMUNITIES TO SUPPORT THRIVING FUTURES FOR ALL RHODE ISLAND FAMILIES AND CHILDREN, REGARDLESS OF IDENTITY, BACKGROUND, OR CIRCUMSTANCE.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	REBECCA ELIZABETH MCGOLDRICK	155 MEDWAY ST. #6 PROVIDENCE, RI 02906 USA
SECRETARY	JARED ETHAN MOFFAT	155 MEDWAY ST. #6 PROVIDENCE, RI 02906 USA
VICE PRESIDENT	JARED ETHAN MOFFAT	155 MEDWAY ST. #6 PROVIDENCE, RI 02906 USA
EXECUTIVE DIRECTOR	REBECCA ELIZABETH MCGOLDRICK	155 MEDWAY ST. #6 PROVIDENCE, RI 02906 USA
DIRECTOR OF OUTREACH AND PLANNING	JARED ETHAN MOFFAT	155 MEDWAY ST. #6 PROVIDENCE, RI 02906 USA
ASSISTANT DIRECTOR	ANNAJANE YOLKEN	11 ALMY ST. PROVIDENCE, RI 02909 USA
DIRECTOR	BRAD BROCKMANN	214 GLENWOOD AVE., #2 PAWTUCKET, RI 02860 US
DIRECTOR	MICHELLE MCKENZIE	119 LAURISTON STREET PROVIDENCE, RI 02906 US
DIRECTOR	DAVID LEWIS	165 BLACKSTONE BLVD. PROVIDENCE, RI 02906 US
DIRECTOR	ALEXANDRIA MACMADU	53 DOYLE AVE. PROVIDENCE, RI 02906 USA
DIRECTOR	JORDAN SEABERRY	11 BLUFF ST. RIVERSIDE, RI 02915 USA
DIRECTOR	JOHN PRINCE	265 ELMWOOD AVE. PROVIDENCE, RI 02907 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**

JARED MOFFAT 72 ARNOLD ST PROVIDENCE , RI 02906

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

Signed this 6 Day of June, 2017 at 12:27:04 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 JARED MOFFAT
Signature of Authorized Person

Form No. 631
Revised 09/07

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