



**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. 000114465

2. Name of Corporation Rhode Island Registry of Interpreters for the Deaf, 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: 55 PITMAN ST
City or Town: NORTH PROVIDENCE State: RI Zip: 02911 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 PROVIDE INTERNATIONAL, NATIONAL, STATE AND LOCAL FORUMS AND AN ORGANIZATIONAL STRUCTURE FOR THE GROWTH AND DEVELOPMENT OF THE PROFESSION OF INTERPRETATION AND TRANSLITERATION OF AMERICAN SIGN LANGUAGE AND ENGLISH FOR THE DEAF.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
TREASURER	MICHELE D NEILEY	104 HILLTOP DR WARWICK, RI 02818 USA
SECRETARY	MAUREEN MCENTEE	PO BOX 9107 WARWICK, RI 02889 USA
ASSISTANT SECRETARY	CHARLEY THORN	24 CHERRY VALLEY RD CHEPACHET, RI 02814 USA
DIRECTOR	HEATHER NEIDBALA	72 COLLATION CRCL NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	HEATHER ANDERSON	895 READ SCHOOL RD COVENTRY, RI 02818 USA
DIRECTOR	HAYLEY BACCAIRE	55 PITMAN ST NORTH PROVIDENCE, RI 02911 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

CAROL FAY 184 UNIVERSITY AVENUE 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 30 Day of June, 2017 at 8:58:42 AM 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 HAYLEY BACCAIRE
Signature of Authorized Person

Form No. 631
Revised 09/07