



**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. 000073367

2. Name of Corporation Crayons Early Care & Education Center, 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

4. Corporate Address in Rhode Island

No. and Street: 3445 POST ROAD

City or Town: WARWICK

State: RI

Zip: 02886

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

EDUCATION & CARE OF INFANTS, TODDLERS & PRE-SCHOOL CHILDREN AWAY FROM THEIR HOMES.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
CFO	DOMENIC CAPPALLI	86 COLE DRIVE NORTH KINGSTOWN, RI 02852 US
ASSISTANT SECRETARY	ALICIA Y. FONTES	3445 POST ROAD WARWICK, RI 02886 US
PRESIDENT AND CEO	JUDITH A. SULLIVAN	93 WILCOX AVENUE PAWTUCKET, RI 02860 US
COO	ALBERT VARIO	5 MENARD LANE SMITHFIELD, RI 02917 US
DIRECTOR/CHAIRMAN	WILLIAM BRYAN	485 WEAVER HILL ROAD WEST GREENWICH, RI 02817 US
DIRECTOR/TREASURER	DAVID FEENEY	59 JENKINS COURT NORTH KINGSTOWN, RI 02856 US
DIRECTOR/SECRETARY	GLORIA FAIRBANKS	59 JENKINS COURT NORTH KINGSTOWN, RI 02856 US
DIRECTOR	TOM AHERN	5 BOXWOOD DRIVE EAST GREENWICH, RI 02818 US
DIRECTOR	CHRISTINE GADBOIS	155 DAVIS STREET SEEKONK, MA 02771 US
DIRECTOR	PHILIP GOULD	7 COOKE STREET PROVIDENCE, RI 02906 US
DIRECTOR	CHRISTINA LEZAOLA	54 EMILY WAY SEEKONK, MA 02771 US
DIRECTOR	JEFF BOGOSIAN	28 DELTA DRIVE SAUDERSTOWN, RI 02874 US
DIRECTOR	JILL PARKER	301 HOWLAND AVENUE EAST GREENWICH, RI 02818 US

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

WILLIAM O'GARA PANNONE LOPES DEVEREAUX & OGARA LLC 1301 ATWOOD AVENUE, SUITE 215 N JOHNSTON , RI 02919

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

Signed this 27 Day of July, 2017 at 5:24:35 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 ALICIA FONTES
Signature of Authorized Person

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