



**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.** 000107141

**2. Name of Corporation** RHODE ISLAND SERVICE COORDINATOR COLLABORATIVE (RISCC)

**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

6

813920

**4. Corporate Address in Rhode Island**

No. and Street: 204 GREENVILLE AVENUE

City or Town: JOHNSTON

State: RI Zip: 02919 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 AND TRAINING OF RESIDENT SERVICES COORDINATORS.EXCLUSIVELY FOR CHARITABLE RELIGIOUS EDUCATIONA AND SCIENTIFIC PURPOSES TO SUPPPORT ALL RI RESIDENT SERVICE COORDINATORS THROUGH EDUCATION ADVOCACY AND AS A LINK TO NECESSARY RESOURDES AND COMMUNITY RELATIONSHIPS THAT FURTHER ENHANCE THE RESIDENT SERVICES PROGRAM IN ELDERLY DISABLED AND FAMILY HOUSING

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	SUSAN VASQUES	1221 SAUGATUCKET ROAD WAKEFIELD, RI 02879 USA
TREASURER	MANUEL JOHN GONCALVES	75 EAST AVENUE OFFICE PAWTUCKET, RI 02860 USA
SECRETARY	ELIZABETH BODE	369 MONTGOMERY AVE. PROVIDENCE, RI 02905 USA
VICE PRESIDENT	NICOLE REDDY	204 GREENVILLE AVENUE JOHNSTON, RI 02919 USA
DIRECTOR	SANDY MCCARTHY	50 RANDALL STREET PROVIDENCE, RI 02904 USA
DIRECTOR	JESSICA MIGNEAULT	10 FRANKLIN STREET LINCOLN, RI 02865 USA
DIRECTOR	JESUS DIAZ	44 WASHINGTON STREET PROVIDENCE, RI 02903 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**

RHODE ISLAND CENTER FOR LAW AND PUBLIC POLICY INC 3288 POST ROAD WARWICK , RI  
02886

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

**Signed this 1 Day of August, 2017 at 12:26:19 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 MANUEL JOHN GONCALVES  
Signature of Authorized Person

Form No. 631  
Revised 09/07