



**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:** 2018

**1. Corporate ID No.** 000030845

**2. Name of Corporation** The Corliss Institute, 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: 290 MAIN STREET  
City or Town: WARREN State: RI Zip: 02885 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**

CARE AND TRAINING OF DEAF ADULTS WITH ADDITIONAL DISABILITIES

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**

| <b>Title</b>   | <b>Individual Name</b><br>First, Middle, Last, Suffix | <b>Address</b><br>Address, City or Town, State, Zip Code, Country |
|----------------|---|---|
| PRESIDENT      | FREDERICK L ROCKEFELLER                               | 23 ANCHORAGE WAY<br>BARRINGTON, RI 02806 USA                      |
| TREASURER      | PETER LOESCHER CPA                                    | 128 DORRANCE ST SUITE 520<br>PROVIDENCE, RI 02903 USA             |
| SECRETARY      | CHERYL KING   | 18 MIDDLE ST<br>BARRINGTON, RI 02806 USA                          |
| VICE PRESIDENT | KEITH SARTINI   | 7 DIXON AVE<br>BRISTOL, RI 02809 USA                              |
| DIRECTOR       | JUNE ROCKEFELLER                                      | 458 BAY POND PARK<br>PAUL SMITHS, NY 12970 USA                    |
| DIRECTOR       | DAVID A SALIT   | 100 WESTMINSTER ST 5TH FL<br>PROVIDENCE, RI 02903 USA             |
| DIRECTOR       | ROBIN DEWEY   | 8 GLENFIELD RD<br>BARRINGTON, RI 02806 USA                        |
| DIRECTOR       | KEITH SARTINI   | 7 DIXON AVE<br>BRISTOL, RI 02809 USA                              |
| DIRECTOR       | CHERYL KING   | 18 MIDDLE ST<br>BARRINGTON, RI 02806 USA                          |
| DIRECTOR       | MANUEL MARTIN   | 604 BROAD ST<br>CUMBERLAND, RI 02864 USA                          |
| DIRECTOR       | FREDERICK L ROCKEFELLER                               | 23 ANCHORAGE WAY<br>BARRINGTON, RI 02806 USA                      |
| DIRECTOR       | PETER LOESCHER  | 128 DORRANCE ST SUITE 520<br>PROVIDENCE, RI 02903 USA             |
| DIRECTOR       | MARY EDLER  | 4 AVENIR COURT<br>BRISTOL, RI 02809 USA                           |
| DIRECTOR       | RON GRANDCHAMP  | 40 SHEFFIELD AVE<br>NEWPORT, RI 02840 US                          |
| DIRECTOR       | RICK COSTA  | 33 OILVER ST<br>BRISTOL, RI 02809 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**

F. L. ROCKEFELLER, JR. 290 MAIN STREET WARREN , RI 02885

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

**Signed this 7 Day of May, 2018 at 11:14:24 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 FREDERICK L. ROCKEFELLER  
Signature of Authorized Person

Form No. 631  
Revised 09/07

© 2007 - 2018 State of Rhode Island and Providence Plantations  
All Rights Reserved