



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.** 000030398

**2. Name of Corporation** Tri-County Community Action Agency

**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: 1126 HARTFORD 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**

COMMUNITY ACTION AGENCY PROVIDING SERVICES SUCH AS HEAD START, DAY CARE, COUNSELING, ETC.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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

| <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    | JOSEPH DESANTIS                                       | 1126 HARTFORD AVENUE<br>JOHNSTON, RI 02919 USA                    |
| TREASURER    | EDWARD E. GEMMA                                       | 8 DEERHILL DRIVE<br>SMITHFIELD, RI 02917 USA                      |
| SECRETARY    | LYNNE FINNEGAN                                        | 824 BROADROCK ROAD<br>PEACEDALE, RI 02879 USA                     |
| CHAIR        | RICHARD DELFINO                                       | 87 SIMMONSVILLE AVENUE<br>JOHNSTON, RI 02919 USA                  |
| VICE CHAIR   | ROBERT O'BRIEN                                        | 96 ELENA STREET<br>NORTH PROVIDENCE, RI 02904 USA                 |
| DIRECTOR     | JOHN STOUKIDES MD                                     | 2 ATLANTIC BOULEVARD<br>NORTH PROVIDENCE, RI 02911 USA            |
| DIRECTOR     | CHRISTINE LENNON                                      | PO BOX 388<br>NARRAGANSETT, RI 02882 USA                          |
| DIRECTOR     | LYNNE FINNEGAN                                        | 824 BROADROCK ROAD<br>PEACEDALE, RI 02879 USA                     |
| DIRECTOR     | PAUL MACDONALD                                        | 514 COLWELL ROAD<br>HARRISVILLE, RI 02830 USA                     |
| DIRECTOR     | PAUL GOTT                                             | 52 RESERVOIR AVENUE<br>JOHNSTON, RI 02919 USA                     |
| DIRECTOR     | EDWARD A. GEMMA                                       | 8 DEERHILL DRIVE<br>SMITHFIELD, RI 02917 USA                      |
| DIRECTOR     | BEN ZANNI                                             | 15 CAMBRIDGE CIRCLE<br>SMITHFIELD, RI 02917 USA                   |
| DIRECTOR     | SAIKON GBEHAN                                         | 6A KATHERINE DRIVE<br>JOHNSTON, RI 02919 USA                      |
| DIRECTOR     | CHERYL JACKSON                                        | 65 SERREL ROAD<br>JOHNSTON, RI 02919 USA                          |
| DIRECTOR     | CRAIG LEVIS                                           | 49 FARNUM PIKE<br>ESMOND, RI 02917 USA                            |
| DIRECTOR     | RICHARD DELFINO                                       | 87 SIMMONSVILLE AVE<br>JOHNSTON, RI 02919 USA                     |
| DIRECTOR     | ROBERT O'BRIEN                                        | 96 ELENA STREET<br>NORTH PROVIDENCE, RI 02904 USA                 |
| DIRECTOR     | AMBER CHAMPLIN                                        | 12 ROLLING HILL DRIVE<br>EXETER, RI 02822 USA                     |
| DIRECTOR     | JOCELYN TAVAREZ                                       | 169 ROUNDS AVE<br>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**

DON E. WINEBERG, ESQ. ONE PARK ROW, SUITE 300 PROVIDENCE , RI 02903

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

**Signed this 29 Day of May, 2018 at 4:07:40 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 DON E. WINEBERG  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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