



**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.** 000971848

**2. Name of Corporation** Dare To Dream Ranch, 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: 12 SNAGWOOD RD  
City or Town: FOSTER State: RI Zip: 02825 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 TRANSFORM THE LIVES OF US MALE AND FEMALE MILITARY VETERANS BY PROVIDING A MULTIFACETED EQUINE ASSISTED THERAPY PROGRAM TO HELP THEM LEARN HOW TO MANAGE CURRENT SITUATIONS AND FUTURE CHALLENGES. TO TEACH PARTICIPANTS TO GROW A GARDEN AND TO USE THIS GARDEN TO FEED HOMELESS VETERANS IN THE STATE OF RITO OFFER JOB INTERNSHIP OPPORTUNITIES FOR PARTICIPANTS IN THE PROGRAM

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	CYNDI CHROSTEK	78 E. KILLINGLY RD FOSTER, RI 02825 USA
PRESIDENT-ELECT	PETER COFFEY	189 BLACK HILL RD PLAINFIELD , CT 06374 USA
DIRECTOR, TREASURER	CARLOS RIOJAS	1177 FRENCHTOWN RD E. GREENWICH , RI 02818 USA
DIRECTOR, WOODWORKING	CHRISTOPHER ROWE	177 CHASES LN MIDDLETOWN, RI 02842 USA
BOARD CHAIR	JON SHELBURNE ESQ.	73 MORGAN ST PORTSMOUTH, RI 02871 USA
DIRECTOR, FUNDRAISING CHAIR	ROBBIN NEILL RN	352 PLAIN RD W. GREENWICH, RI 02817 USA
DIRECTOR	MICHELLE SOLOMON	7 WHITNEY DRIVE LINCOLN, RI 02865 USA
DIRECTOR	JOHN SOLOMON DO, FAAFP	594 GREAT RD #103 N. SMITHFIELD, RI 02896 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**

KAREN DALTON 12 SNAGWOOD RD FOSTER , RI 02825

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

**Signed this 26 Day of June, 2018 at 12:04:46 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 KAREN DALTON  
Signature of Authorized Person

Form No. 631  
Revised 09/07