



**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.** 000093191

**2. Name of Corporation** FACTS - SUNRISE, 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: 18 PARKIS AVENUE

City or Town: PROVIDENCE

State: RI

Zip: 02907

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 PROVIDE ELDERLY OR DISABLED PERSONS WITH HOUSING FACILITIES.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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

| <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      | B. JOSEPH REDDISH, III                                | 23 COREY TRAIL ROAD<br>WYOMING, RI 02898 USA                      |
| TREASURER      | FRED AZAR   | 565 PLEASANT STREET<br>PAWTUCKET, RI 02860 USA                    |
| SECRETARY      | DAVID ROBERT  | 360 SHAWOMET AVENUE<br>WARWICK, RI 02889 USA                      |
| VICE PRESIDENT | MARC GAUTHIER   | 25 MOHAWK TRAIL<br>CRANSTON, RI 02921 USA                         |
| DIRECTOR       | WILLIAM O'GARA  | 111 ARLINGTON AVENUE<br>PROVIDENCE, RI 02906 USA                  |
| DIRECTOR       | FREDERICK JOHNSON                                     | 1180 NARRAGANSETT BLVD<br>CRANSTON, RI 02905 USA                  |
| DIRECTOR       | DIANE SIEDLECKI                                       | 140 WILSON AVENUE<br>WARWICK, RI 02889 USA                        |
| DIRECTOR       | RAYMOND MALM  | 5 MANN AVENUE<br>NEWPORT, RI 02840 USA                            |
| DIRECTOR       | LAMEL MOORE   | 135 OLD MAIN STREET<br>MANVILLE, RI 02838 USA                     |
| DIRECTOR       | RICHARD RAMSEY  | 458 WAYLAND AVENUE<br>PROVIDENCE, RI 02906 USA                    |
| DIRECTOR       | JOSEPH REUSCH   | 52 ROBINS WAY<br>WARWICK, RI 02879 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**

GINA MERCURE 18 PARKIS AVENUE PROVIDENCE , RI 02907

**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 June, 2018 at 9:32:42 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 B JOSEPH REDDISH III  
Signature of Authorized Person

Form No. 631  
Revised 09/07