



**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.** 000028342

**2. Name of Corporation** The Meadowbrook Waldorf Association

**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

611110

**4. Corporate Address in Rhode Island**

No. and Street: 300 KINGSTOWN ROAD

City or Town: WEST KINGSTON

State: RI

Zip: 02892

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**

A SCHOOL NURSERY THROUGH GRADE 8

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**

| Title          | Individual Name<br>First, Middle, Last, Suffix | Address<br>Address, City or Town, State, Zip Code, Country |
|----------------|------------------------------------------------|------------------------------------------------------------|
| PRESIDENT      | TABITHA JORGENSEN                              | 300 KINGSTOWN RD<br>WEST KINGSTON, RI 02892 USA            |
| TREASURER      | STEPHEN THOMPSON                               | 300 KINGSTOWN RD<br>WEST KINGSTON, RI 02892 USA            |
| SECRETARY      | MIKHAIL SAGAL                                  | 300 KINGSTOWN RD<br>WEST KINGSTON, RI 02892 USA            |
| VICE PRESIDENT | LORNA PERSSON                                  | 300 KINGSTOWN RD<br>WEST KINGSTON, RI 02892 USA            |
| DIRECTOR       | JENNIFER FARRELLY                              | 300 KINGSTOWN RD<br>WEST KINGSTON, RI 02892 USA            |
| DIRECTOR       | THOMAS O'BRIEN                                 | 300 KINGSTOWN RD<br>WEST KINGSTON, RI 02892 USA            |
| DIRECTOR       | KRISTINA BOVING                                | 300 KINGSTOWN RD<br>WEST KINGSTON, RI 02892 USA            |
| DIRECTOR       | PATRICIA GOLDMAN                               | 300 KINGSTOWN RD<br>WEST KINGSTON, RI 02892 USA            |
| DIRECTOR       | AMY LLOYD RIPPE                                | 300 KINGSTOWN RD<br>WEST KINGSTON, RI 02892 USA            |
| DIRECTOR       | DOUGLAS PEARCE                                 | 300 KINGSTOWN RD<br>WEST KINGSTON, RI 02892 USA            |
| DIRECTOR       | LISA RICHTER                                   | 300 KINGSTOWN RD<br>WEST KINGSTON, RI 02892 USA            |
| DIRECTOR       | DOUGLAS REILLY                                 | 300 KINGSTOWN RD<br>WEST KINGSTON, RI 02892 USA            |
| DIRECTOR       | NILS WIBERG                                    | 300 KINGSTOWN RD<br>WEST KINGSTON, RI 02892 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**

KRISTINA BOVING 300 KINGSTOWN ROAD WEST KINGSTON , RI 02892

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

**Signed this 3 Day of July, 2018 at 2:52:06 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 JENNIFER FARRELLY  
Signature of Authorized Person

