



**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. 001663832

2. Name of Corporation Critical Thinking Concepts, 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
713940

4. Corporate Address in Rhode Island

No. and Street: C/O KEITH A. HARRISON
85 ORCHARD STREET

City or Town: WOONSOCKET State: RI Zip: 02895 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 166 HOLDEN ST

City or Town: PROVIDENCE State: RI Zip: 02908 Country: USA

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

(I) YOUTH SPORTS PROGRAMMING AND RELATED SERVICES, AND (II) TO CARRY ON ANY OTHER LAWFUL BUSINESS FOR WHICH NON-PROFIT CORPORATIONS MAY BE INCORPORATED UNDER THE RI NONPROFIT CORPORATION ACT, AS MAY BE AMENDED FROM TIME TO TIME, AND EXPRESSLY SUBJECT TO ANY FURTHER/ADDITIONAL REQUIREMENTS AND/OR RESTRICTIONS PURSUANT TO THE IRS 501(C) STATUS NOW OR HEREAFTER GRANTED TO THE CORPORATION.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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

| Title | Individual Name First, Middle, Last, Suffix | Address Address, City or Town, State, Zip Code, Country |
|--------------|---|---|
| CEO | KARL BROWN | 166 HOLDEN STREET PROVIDENCE, RI 02908 UNI |
| CEO | KARL BROWN | 166 HOLDEN ST PROVIDENCE, RI 02908 USA |
| DIRECTOR | KEITH A HARRISON | 85 ORCHARD STREET WOONSOCKET, RI 02895 USA |
| DIRECTOR | PETERSON S CARTO | 67 WAITE STREET PROVIDENCE, RI 02908 USA |
| DIRECTOR | KARL BROWN | 166 HOLDEN STREET PROVIDENCE, RI 02908 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**

KAS R. DECARVALHO, ESQ. 1301 ATWOOD AVENUE, SUITE 215N JOHNSTON , RI 02919

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

Signed this 18 Day of July, 2018 at 5:29:44 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 KARL BROWN
Signature of Authorized Person

Form No. 631
Revised 09/07