



**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. 001663941

2. Name of Corporation Dysautonomia Support Network

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

813212

4. Corporate Address in Rhode Island

No. and Street: 18 WHITTIER DR

City or Town: JOHNSTON

State: RI

Zip: 02919-5174

Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country: UNI

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

EXCLUSIVELY FOR CHARITABLE RELIGIOUS EDUCATIONAL PURPOSES WITHIN THE MEANING OF SECTION 501 C3 OF THE INTERNAL REVENUE CODE OF 1986

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
PRESIDENT	AMANDA AIKULOLA	18 WHITTIER DRIVE JOHNSTON, RI 02919 USA
TREASURER	MARTHA ROSS	19 OVERHILL DRIVE TROPHY CLUB , TX 76262 US
SECRETARY	CATHY MURDICK	20714 GOLDEN RIDGE DRIVE ASHBURN, VA 20147 US
VICE PRESIDENT	BROOKE OSHEA	624 DEFOREST ROAD COPELL , TX 75019 US
DIRECTOR	JOANNA BEHM	340 LARTRY DRIVE RED LION , PA 17356 US
DIRECTOR	PATRICIA MEEGAN	195 ARLINGTON AVE WARWICK, RI 02889 USA
DIRECTOR	JON RODIS	45 PEARL AVENUE, UNIT 3 WINTHROP , MA 02152 USA
DIRECTOR	AMANDA AIKULOLA	18 WHITTIER DR JOHNSTON, RI 02919-5174 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**

AMANDA AIKULOLA 18 WHITTIER DRIVE 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 26 Day of September, 2018 at 11:19:42 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 CATHY MURDICK
Signature of Authorized Person

Form No. 631
Revised 09/07