



**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.** 000031134

**2. Name of Corporation** SENIOR COMPANION PROGRAM OF RHODE ISLAND, 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

6

624120

**4. Corporate Address in Rhode Island**

No. and Street: 57 HOWARD AVE.

LP BLDG

City or Town: CRANSTON

State: RI

Zip: 02920

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**

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**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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><br>First, Middle, Last, Suffix | <b>Address</b><br>Address, City or Town, State, Zip Code, Country |
|----------------|-------------------------------------------------------|-------------------------------------------------------------------|
| PRESIDENT      | ANA HANLEY                                            | 70 MARLBOROUGH ST.<br>CRANSTON, RI 02910 USA                      |
| SECRETARY      | CARLA VOSE                                            | 57 HOWARD AVE<br>CRANSTON, RI 02920 USA                           |
| VICE PRESIDENT | JENNY R MARTINEZ                                      | 57 HOWARD AVE<br>CRANSTON, RI 02920 USA                           |
| DIRECTOR       | LINDA A'VANT-DEISHINNI                                | ONE CATHEDRAL SQ.<br>PROVIDENCE, RI 02903 USA                     |
| DIRECTOR       | MARITZA PEREZ                                         | 206 ELMWOOD AVE<br>PROVIDENCE, RI 02907 USA                       |
| DIRECTOR       | KERRI A KYRIAKAKIS                                    | 111 HOWARD AVE<br>CRANSTON, RI 02920 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**

JENNY MARTINEZ 57 HOWARD AVENUE, LP BLDG CRANSTON , RI 02920

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

**Signed this 21 Day of February, 2019 at 1:14:40 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 JENNY MARTINEZ  
Signature of Authorized Person

Form No. 631  
Revised 09/07