



**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:** 2019

**1. Corporate ID No.** 000030845

**2. Name of Corporation** The Corliss Institute, 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: 290 MAIN STREET

City or Town: WARREN

State: RI

Zip: 02885

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**

CARE AND TRAINING OF DEAF ADULTS WITH ADDITIONAL DISABILITIES

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	FREDERICK L ROCKEFELLER	23 ANCHORAGE WAY BARRINGTON, RI 02806 USA
TREASURER	PETER LOESCHER CPA	128 DORRANCE ST SUITE 520 PROVIDENCE, RI 02903 USA
SECRETARY	CHERYL KING	18 MIDDLE ST BARRINGTON, RI 02806 USA
DIRECTOR	DAVID A SALIT	100 WESTMINSTER ST 5TH FL PROVIDENCE, RI 02903 USA
DIRECTOR	ROBIN DEWEY	8 GLENFIELD RD BARRINGTON, RI 02806 USA
DIRECTOR	CHERYL KING	18 MIDDLE ST BARRINGTON, RI 02806 USA
DIRECTOR	MANUEL MARTIN	604 BROAD ST CUMBERLAND, RI 02864 USA
DIRECTOR	FREDERICK L ROCKEFELLER	23 ANCHORAGE WAY BARRINGTON, RI 02806 USA
DIRECTOR	PETER LOESCHER	128 DORRANCE ST SUITE 520 PROVIDENCE, RI 02903 USA
DIRECTOR	MARY EDLER	4 AVENIR COURT BRISTOL, RI 02809 USA
DIRECTOR	RON GRANDCHAMP	40 SHEFFIELD AVE NEWPORT, RI 02840 US

**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**

F. L. ROCKEFELLER, JR. 290 MAIN STREET WARREN , RI 02885

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

**Signed this 5 Day of June, 2019 at 5:02:28 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 JEAN MONIZ  
Signature of Authorized Person

Form No. 631  
Revised 09/07