



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

**FILED**

JUN 05 2019

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RI  
 SECRETARY OF STATE  
 OFFICE

BY 113

Annual Report for the year: **2019**  
 Non-Profit Corporation

- Filing period: June 1 - June 30
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number <b>001672374</b>		2. Exact name of the Corporation <b>FountainHead RI</b>			
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island <b>To engage in any lawful business and activities as permitted under the Act.</b>			
4. NAICS Code <b>813920 - Professional Org</b>					
6. Principal Office Address <b>97 Scenic Way</b>			City <b>Exeter</b>	State <b>RI</b>	Zip <b>02822</b>
7. List ALL officers (names and addresses). Check the box to indicate an attachment <input type="checkbox"/>					
President Name <b>David Almonte</b>			Vice-President Name <b>Jason Dodier</b>		
Street Address <b>97 Scenic Way</b>			Street Address <del>1510 Clarendon Blvd</del> <b>1931 N Cleveland St #411</b>		
City <b>Exeter</b>	State <b>RI</b>	Zip <b>02822</b>	City <b>Arlington</b>	State <b>VA</b>	Zip <del>22209</del> <b>22201</b>
Secretary Name <b>Erica Busillo Adams</b>			Treasurer Name <b>Matthew Hassett</b>		
Street Address <del>44 Huxley Avenue</del> <b>194 Adelaide Ave</b>			Street Address <b>8 Schooner Cove Lane</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02908 7</b>	City <b>Narragansett</b>	State <b>RI</b>	Zip <b>02882</b>
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. Check the box to indicate an attachment <input checked="" type="checkbox"/>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</b>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</i>					
Name of Officer/Authorized Representative <b>David Almonte</b>				Date <b>4/15/2019</b>	
Signature of Officer/Authorized Representative <i>[Signature]</i>					

**FountainHead RI #001672374**

**Directors**

**2019**

1. David Almonte – 97 Scenic Way, Exeter, RI 02822
2. Jason Dodier – 1931 N Cleveland Street #411, Arlington, VA 22201
3. Erica Busillo Adams – 194 Adelaide Avenue, Providence, RI 02907
4. Matthew Hassett – 8 Schooner Cove Lane, Narragansett, RI 02882
5. Leigh Furtado – 8 Grant Lane, Cumberland, RI 02864