State of Dhode Joland and Drovidence Diantations			
State of Rhode Island and Providence Plantations Fee: \$20.00 Office of the Secretary of State			
Division Of Business Services			
148 W. River Street			
Providence RI 02904-2615 (401) 222-3040			
(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. 000068448			
2. Name of Corporation Gateways to Change, Inc.			
3. State of Incorporation			
State: <u>RI</u>			
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 <u>click here.</u>			
NAICS Code 6			
<u>624190</u>			
4. Corporate Address in Rhode Island			
No. and Street: 1060 PARK AVENUE			
City or Town:CRANSTONState: RIZip:02910Country: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			
TO PROVIDE PERSONS W/DEVELOPMENTAL DISABILITES WITH QUALITY LIVING AND WORK ENVIRONMENTS.			
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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete			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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	ATHENA FLEMING DYER	69 LAKESIDE DRIVE COVENTRY, RI 02816 USA
TREASURER	JAMES MORETTI	3 SPINEY LANE N. KINGSTOWN, RI 02852 USA
CEO	CATHERINE MCGILLIVRAY	37 BEACHMONT AVE CRANSTON, RI 02905 USA
SECTARY OF CORPORATION	DOREEN MACLANE-BAEDER	135 SYNDON ROAD CRANSTON, RI 02905 USA
VICE PRESIDENT	ROSALIE LOPEZ	39 BEACHMONT AVE CRANSTON, RI 02905 USA
DIRECTOR	MELISSA CASSIDY	10 BARNEY ST RUMFORD, RI 02916 USA
DIRECTOR	ROSALIE LOPEZ	39 BEACHMONT AVE CRANSTON, RI 02905 USA
DIRECTOR	FRANK BITETTO	300 LAMBERT LIND HIGHWAY, BUILDING B, APARTMENT 130 WARWICK, RI 02886 USA
DIRECTOR	DAVID FERRANTI	300 LAMBERT LIND HYY WARWICK, RI 02886 USA
DIRECTOR	NORBERT LACHMANN	387 PARKSIDE DRIVE WARWICK, RI 02888 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

CATHERINE MCGILLIVRAY 1060 PARK AVENUE CRANSTON, RI 02910

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

Signed this 6 Day of June, 2019 at 3:02:46 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 <u>CATHERINE MCGILLIVRAY</u>

Signature of Authorized Person

Form No. 631 Revised 09/07

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