RI SOS Filing Number: 201995723710 Date: 6/7/2019 11:35:00 AM



State of Rhode Island and Providence Plantations Office of the Secretary of State

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

Foreign Non-Profit 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.** 000790636
- 2. Name of Corporation Battelle for Kids, co.
- 3. State of Incorporation

State: OH

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

Fee: \$20.00

611710

4. Corporate Address in Rhode Island

No. and Street: 450 VETERANS MEMORIAL PARKWAY

City or Town: $\underline{PROVIDENCE}$ State: RI Zip: $\underline{02914}$ 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

STRATEGIC COUNSEL AND INNOVATIVE SOLUTIONS FOR TODAYS COMPLEX, EDUCATIONAL-IMPROVEMENT CHALLENGES.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	KAREN GARZA	4525 TRUEMAN BLVD.
		HILLIARD, OH 43026 USA
SECRETARY	BERHL ROBERTSON JR	4525 TRUEMAN BLVD
		HILLIARD, OH 43026 USA
DIRECTOR	RUSS AUSTIN	4525 TRUEMAN BLVD.
		HILLIARD, OH 43026 USA
DIRECTOR	RICHARD CELESTE	4525 TRUEMAN BLVD.
		HILLIARD, OH 43026 USA
DIRECTOR	MELISSA DIXON	4525 TRUEMAN BLVD.
		HILLIARD, OH 43026 USA
DIRECTOR	MIKE GOMSIOROWSKI	4525 TRUEMAN BLVD.
		HILLIARD, OH 43026 USA
DIRECTOR	LARRY HILSHEIMER	4525 TRUEMAN BLVD.
		HILLIARD, OH 43026 USA
DIRECTOR	AIMEE KENNEDY	4525 TRUEMAN BLVD.
		HILLIARD. OH 43026 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

 $\frac{\text{CT CORPORATION SYSTEM}}{\text{PROVIDENCE}} \ \, \frac{450 \text{ VETERANS MEMORIAL PARKWAY, SUITE 7A}}{\text{EAST}} \\$

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

Signed this 7 Day of June, 2019 at 11:38:06 AM 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 BART LOWN

Signature of Authorized Person

Form No. 631 Revised 09/07

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