



**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. 000057268

2. Name of Corporation Rhode Island Association of Facilities and Services for the Aging

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

813990

4. Corporate Address in Rhode Island

No. and Street: 400 MASSASOIT AVENUE
SUITE 114

City or Town: EAST PROVIDENCE

State: RI

Zip: 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

ESTABLISH & PROMOTE EFFICIENCY & COOPERATION BETWEEN NON-PROFIT HOMES FOR THE AGING.

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Incorporator is no longer applicable; please delete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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	STEPHANIE IGOE	66 BENEFIT STREET PROVIDENCE, RI 02904 USA
TREASURER	ELIZABETH SARRO	111 SOUTH ANGEL STREET PROVIDENCE, RI 02906 USA
SECRETARY	MICHAELA MCKAY	500 WATERFRON DRIVE EAST PROVIDENCE, RI 02914 USA
VICE PRESIDENT	BONNIE SEKERS	1 SHALOM DRIVE WARWICK, RI 02886 USA
DIRECTOR	SANDRA CULLEN	40 IRVING AVENUE EAST PROVIDENCE, RI 02914 USA
DIRECTOR	STEVE HOROWITZ	1 SAINT ELIZABETH WAY EAST GREENWICH , RI 02818 USA
DIRECTOR	PAMELA SAWIN	10 WEYBOSSET STREET PROVIDENCE, RI 02903 USA
DIRECTOR	ELLEN GRIZZETTI	25 BRAYTON AVENUE 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

JAMES NYBERG 225 CHAPMAN STREET PROVIDENCE , RI 02907

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

Signed this 11 Day of June, 2019 at 11:28:37 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 JAMES NYBERG
Signature of Authorized Person

Form No. 631
Revised 09/07