



**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. 000033761

2. Name of Corporation Big Brothers Big Sisters of Rhode Island, 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

6

624110

4. Corporate Address in Rhode Island

No. and Street: 1540 PONTIAC AVENUE

City or Town: CRANSTON

State: RI

Zip: 02920

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

TO PROVIDE MENTORS TO THE YOUTH OF RHODE ISLAND WHO WILL MOTIVATE AND EMPOWER THEM TO MAKE POSITIVE DECISIONS, IMPROVE ACADEMIC RESULTS, AVOID RISKY BEHAVIORS, AND GROW IN A WAY THAT WILL POSITIVELY IMPACT OUR COMMUNITY.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	BRENDAN C. KANE	20 NEWMAN AVENUE RUMFORD, RI 02916 USA
TREASURER	DAVID FONTES	164 BEAR HILL RD., UNIT 7 CUMBERLAND, RI 02864 USA
SECRETARY	ANGELA L. CARR	388 SOUTH MAIN STREET, #47 PROVIDENCE, RI 02903 USA
DIRECTOR	C. PAUL OBERG	160 LYNN CIRCLE EAST GREENWICH, RI 02818 USA
DIRECTOR	SARAH PERLMAN	38 WILLIAM STREET NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	LIZ CATUCCI	20 QUINCY STREET PROVIDENCE, RI 02908 USA
DIRECTOR	TOM FUREY	150 CAROLINA AVE. PROVIDENCE, RI 02905 USA
DIRECTOR	JOSEPH MANERA	1062 RESERVOIR AVENUE CRANSTON, RI 02910 USA
DIRECTOR	HILINA AJAKAIYE	64 ATLANTIC AVENUE PROVIDENCE, RI 02907 USA
DIRECTOR	JAY ALLBAUGH	5 KEYES COURT EAST GREENWICH, RI 02818 USA
DIRECTOR	MICHAEL THOMAS	135 LYNN CIRCLE EAST GREENWICH, RI 02818 USA
DIRECTOR	OLGA LOWE	500 MENDON RD. CUMBERLAND, RI 02864 USA
DIRECTOR	YOMAYRA REYES	101 SUMTER STREET PROVIDENCE, RI 02907 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

KATJE AFONSECA 1540 PONTIAC AVENUE CRANSTON , RI 02920

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

Signed this 24 Day of June, 2019 at 12:25:53 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 KATJE AFONSECA
Signature of Authorized Person

Revised 09/07

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