



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.** 000551294

**2. Name of Corporation** RI Communities for Addiction Recovery Efforts, 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

813319

**4. Corporate Address in Rhode Island**

No. and Street: 134 MATHEWSON STREET

City or Town: PROVIDENCE

State: RI

Zip: 02903

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 MEET THE ECONOMIC AND SOCIAL NEEDS OF ALL PEOPLE IN RECOVERY

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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.*

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
DIRECTOR	MICHELLE MCKENZIE	164 SUMMIT AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	FELICIA DELGATO	177 CYPRESS STREET PROVIDENCE, RI 02906 USA
DIRECTOR	ROBIN MONTVILO	50 ELMCREST AVENUE PROVIDENCE, RI 02908 USA
PRESIDENT, BOARD CHAIR	ELIZABETH MANCHESTER	ONE CUNNINGHMA SQUARE PROVIDENCE, RI 02918 USA
VICE PRESIDENT, VICE CHAIR	JEN PALO	55 OPPER AVENUE WARWICK, RI 02886 USA
SECRETARY	ROXXANNE NEWMAN	81 NORMAN STREET CUMBERLAND, RI 02864 USA
TREASURER	HOLLY HEYMAN	37 FAIRVIEW AVENUE MIDDLETOWN, RI 02842 USA
CEO, EXECUTIVE DIRECTOR	MONICA SMITH	1005 MAIN STREET #1103 PAWTUCKET, RI 02860 USA
DIRECTOR	MICHAEL FINE	210 MAIN STREET PAWTUCKET, RI 02860 USA
DIRECTOR	RICHARD CORLEY	500 ALONQUIN DRIVE WARWICK, RI 02888 USA
DIRECTOR	STEPHEN GUMBLEY	64 NATHANIEL AVENUE PAWTUCKET, RI 02860 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**

GEOFFREY A SCHOOS, ESQ. 3288 POST ROAD WARWICK , RI 02886

**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 August, 2019 at 2:48:27 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 MONICA L SMITH  
Signature of Authorized Person

Form No. 631  
Revised 09/07