



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

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 R.I. DEPT. OF STATE  
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Annual Report for the year: **2019**  
 Non-Profit Corporation

2019 AUG 30 A 10:00

- Filing period: June 1 - June 30
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number <b>000112740</b>		2. Exact name of the Corporation <b>THE AUTISM PROJECT</b>			
3. State of Incorporation <b>Rhode Island</b>		5. Brief description of the character of business conducted in Rhode Island <b>Provides a comprehensive coordinated systems of services and resources for meeting the needs of children with autism spectrum disorders and their families.</b>			
4. NAICS Code <b>622110 - General Medical</b>					
6. Principal Office Address <b>1516 Atwood Avenue</b>		City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>	
7. List ALL officers (names and addresses). <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Joanne Quinn</b>			Vice-President Name <b>None</b>		
Street Address <b>1516 Atwood Avenue</b>			Street Address		
City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>	City	State	Zip
Secretary Name <b>Christina Amedeo</b>			Treasurer Name <b>Gina Sahagian</b>		
Street Address <b>United Way of RI, 50 Valley Street</b>			Street Address <b>Blue Cross Blue Shield, 500 Exchange Street</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. <span style="float: right;">Check the box to indicate an attachment <input checked="" type="checkbox"/></span>					
Director Name <b>Jonathan Roderick (Chair)</b>			Director Name <b>Ned Walsh (Vice Chair)</b>		
Street Address <b>Centreville Bank, 1218 Main Street</b>			Street Address <b>155 Woodbridge Drive</b>		
City <b>West Warwick</b>	State <b>RI</b>	Zip <b>02893</b>	City <b>East Greenwich</b>	State <b>RI</b>	Zip <b>02818</b>
Director Name <b>Christina Amedeo</b>			Director Name <b>Gina Sahagian</b>		
Street Address <b>United Way of RI, 50 Valley Street</b>			Street Address <b>Blue Cross Blue Shield</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</b>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative <b>Joanne Quinn</b>				Date <b>8/26/19</b>	
Signature of Officer/Authorized Representative <i>Joanne H Quinn</i> <span style="float: right;">SIGN DOCUMENT HERE</span>					

**FILED**

MAIL TO:  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

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 BY *CA PDRDV*  
 10:01

The Autism Project  
ID# 112740

Kellie Buckley 730 Ten Rod Road North Kingstown, RI 02852
Kevin Connaughton 34 Stone Ridge Road North Attleboro, MA 02760
Philip Gould Brown University Box 1852 Providence, RI 02912
Al Greer Life Wear Technologies 935 Roger Williams Way North Kingstown, RI 02852