



**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:** 2020

**1. Corporate ID No.** 001677510

**2. Name of Corporation** Access to Recovery 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   
813219

**4. Corporate Address in Rhode Island**

No. and Street: 258 PAWTUCKET AVENUE  
City or Town: RUMFORD State: RI Zip: 02916 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street: 258 PAWTUCKET AVE  
City or Town: RUMFORD State: RI Zip: 02916 Country: UNI

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

GRANTING AFFORDABLE ACCESS TO THE MEANS NECESSARY FOR INDIVIDUALS WHOM SUFFER FROM ADDICTION TO FIND, MAINTAIN AND SUSTAIN A LIFE 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**Incorporator is no longer applicable; please delete**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. 7-6-23**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	JONATHAN GOYER	258 PAWTUCKET AVE RUMFORD, RI 02916 USA
TREASURER	COURTNEY BOLDT	222 OHIO AVE PROVIDENCE, RI 02905 USA
SECRETARY	JEFFREY LALUC	5 JULIA DRIVE NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	COURTNEY BOLDT	222 OHIO AVENUE PROVIDENCE, RI 02905 USA
DIRECTOR	JEFFREY LALUC	5 JULIA DRIVE NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	JONATHAN GOYER	258 PAWTUCKET AVE RUMFORD, RI 02891 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**

JONATHAN GOYER 258 PAWTUCKET AVENUE RUMFORD , RI 02916

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

**Signed this 3 Day of February, 2020 at 9:31:05 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 JONATHAN GOYER  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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