



**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.** 001676030

**2. Name of Corporation** Legal Insurrection Foundation

**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   
813319

**4. Corporate Address in Rhode Island**

No. and Street: 18 MAPLE AVE #280  
City or Town: BARRINGTON State: RI Zip: 02806 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**

THE CORPORATION IS ESTABLISHED PRIMARILY TO FURTHER THE COMMON GOOD AND GENERAL WELFARE OF THE CITIZENS OF THE UNITED STATES OF AMERICA FOR ANY PURPOSE PERMITTED TO BE EXEMPT FROM TAXATION UNDER SECTION 501(C) (3) OF THE UNITED STATES INTERNAL REVENUE CODE, AS NOW IN OR HEREAFTER AMENDED.

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	WILLIAM A JACOBSON	18 MAPLE AVE #280 BARRINGTON, RI 02806 USA
TREASURER	MARTHA WALLICK	18 MAPLE AVE #280 BARRINGTON, RI 02806 USA
SECRETARY	ANNE SEGAL	18 MAPLE AVE #280 BARRINGTON, RI 02806 USA
DIRECTOR	ANNE SEGAL	18 MAPLE AVE #280 BARRINGTON, RI 02806 USA
DIRECTOR	MARTHA WALLICK	18 MAPLE AVE #280 BARRINGTON, RI 02806 USA
DIRECTOR	WILLIAM A JACOBSON	18 MAPLE AVE #280 BARRINGTON, RI 02806 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**

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST  
PROVIDENCE , RI 02914

**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 June, 2020 at 12:55:35 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 WILLIAM A. JACOBSON  
Signature of Authorized Person

Form No. 631  
Revised 09/07