



**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.** 000111771

**2. Name of Corporation** Community 2000 Education 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   
813990

**4. Corporate Address in Rhode Island**

No. and Street: 125 SUNSET DRIVE  
P.O. BOX 1161  
City or Town: CHARLESTOWN State: RI Zip: 02813 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 SCHOLARSHIP GRANTS TO STUDENTS UNDERTAKING OR INVOLVED IN COLLEGE OR VOCATIONAL SCHOOL EDUCATION.

**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**Incorporator is no longer applicable; please delete**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	J. CHRISTOPHER PHILIPS	125 SUNSET DRIVE CHARLESTOWN, RI 02813 USA
TREASURER	THOMAS G DOYLE	32 NEPTUNE AVE. CHARLESTOWN, RI 02813 USA
SECRETARY	KIRSTEN LACROIX	97 KINGSTOWN RD RICHMOND, RI 02898 USA
VICE PRESIDENT	JOSEPH REDDISH	23 COREY TRAIL WYOMING, RI 02898 USA
VICE PRESIDENT	CATHERINE GIUSTI	14 KEITH DRIVE HOPE VALLEY,, RI 02832 USA
DIRECTOR	CHRISTOPHER GETMAN	126 HARTFORD TURNPIKE HAMDEN, CT 06517 USA
DIRECTOR	JUSTIN W. LEE	8 SHADY GROVE RD HOPE VALLEY, RI 02832 USA
DIRECTOR	DAVID A. CAPALDI	148 SUNSET DRIVE CHARLESTOWN, RI 02813 USA
DIRECTOR	GREGORY KENNEY	271 SPRING ST. ROCKVILLE, RI 02873 USA
DIRECTOR	MICHELLE COLE	20 BEECHWOOD HOLLOW BRADFORD, RI 02808 USA
DIRECTOR	RYAN CALLAHAN	40 GREENS END LN RICHMOND, RI 02892 USA
DIRECTOR	DANA HALL	10 LANCASTER AVE. WARWICK, RI 02886 USA
DIRECTOR	ELISABETH ANDERSON	9 CEDAR POND DR, APT 1 WARWICK, RI 02886 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**

THOMAS G. DOYLE 32 NEPTUNE AVENUE CHARLESTOWN , RI 02813

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

**Signed this 13 Day of June, 2020 at 5:49:37 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 THOMAS G DOYLE  
Signature of Authorized Person

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