



**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. 001700198

2. Name of Corporation Autism Society Rhode Island

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: PO BOX 16603
City or Town: RUMFORD State: RI Zip: 02916 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 ORGANIZATION IS AN ADVOCACY GROUP TO PROMOTE THE GENERAL WELFARE, EDUCATION AND TRAINING OF INDIVIDUALS IN RHODE ISLAND WITH AUTISM.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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 |
|--------------|---|---|
| INCORPORATOR | LISA REGO | 19 BOWEN STREET RUMFORD, RI 02916 USA |
| DIRECTOR | JEANNE POWERS | 276 PAWTUCKET AVENUE RUMFORD, RI 02916 USA |
| DIRECTOR | ANN MARIE ANDERSON | 253 HILL DRIVE REHOBOTH, MA 02769 USA |
| DIRECTOR | PATRICIE RIDINY | 45 HAVEN STREET WARWICK, RI 02889 USA |
| DIRECTOR | PEGGY STOCKER | 344 BUTTONWOODS AVENUE WARWICK, RI 02886 USA |
| DIRECTOR | CLAUDIA SWIADER | 156 HILLTOP DRIVE CRANSTON, RI 02920 USA |
| DIRECTOR | KELLY KINDER | 162 ALGONQUIN ROAD RUMFORD, RI 02916 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**

LISA REGO 19 BOWEN STREET 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 8 Day of July, 2020 at 9:10:41 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 LISA E REGO
Signature of Authorized Person

Form No. 631
Revised 09/07