



**State of Rhode Island
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. 001697499

2. Name of Corporation Rhode Island Families for School Choice, 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

4. Corporate Address in Rhode Island

No. and Street: TWO ELM STREET

P.O. BOX 414

City or Town: WESTERLY

State: RI

Zip: 02891

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 COORDINATE EVENTS DURING NATIONAL SCHOOL CHOICE WEEK, TO RAISE PUBLIC AWARENESS OF THE DIFFERENT K-12 PUBLIC AND PRIVATE EDUCATION OPTIONS AVAILABLE TO CHILDREN AND FAMILIES, WHILE ALSO SPOTLIGHTING THE BENEFITS OF SCHOOL CHOICE.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
DIRECTOR	MATT FITZGERALD	25 ADRIAN STREET WARWICK, RI 02886 USA
DIRECTOR	ROB RIANNA	50 CEDAR SWAMP ROAD - UNIT 1 SMITHFIELD, RI 02917 USA
DIRECTOR	ERIN CLARK	13 ZOAR AVENUE JOHNSTON, RI 02919 USA
DIRECTOR	EILEEN PAPA	30 SUMMERLAND ROAD WARWICK, RI 02886 USA
DIRECTOR	SHEILA KONIS	6 FRANCA DRIVE BRISTOL, RI 02809 USA
DIRECTOR	CHRIS IANNOTTI	15 CARD STREET COVENTRY, RI 02816 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**

MARK BERARDO, ESQ. TWO ELM STREET WESTERLY , RI 02891

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

Signed this 23 Day of July, 2020 at 1:50:41 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 MARK BERARDO, ESQUIRE
Signature of Authorized Person

Form No. 631
Revised 09/07

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