



**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. 001683980

2. Name of Corporation The Chris Collins Foundation, 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

6

999999

4. Corporate Address in Rhode Island

No. and Street: 114 DENDRON ROAD

City or Town: SOUTH KINGSTOWN

State: RI

Zip: 02879

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 RAISE AWARENESS ABOUT MENTAL ILLNESS THROUGH EDUCATION AND OPEN COMMUNICATION AND TO DEVELOP AND/OR ENHANCE PEER TO PEER SUPPORT FOR MENTAL ILLNESS IN SCHOOLS; TO RAISE FUNDS TO SUPPORT SUCH PURPOSES, AND FOR ALL PURPOSES RELATED THERETO OR IN FURTHERANCE THEREOF.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	DEB NICHOLS	43 WILLIAM REYNOLDS RD EXETER, RI 02822 USA
DIRECTOR	KIM KAY	182 GRACES LANE WEST KINGSTON, RI 02892 USA
DIRECTOR	JOELLE DEQUATTRO	18 PADDOCK COURT SOUTH KINGSTOWN, RI 02879 USA
DIRECTOR	MARK COLLINS	114 DENDRON ROAD WAKEFIELD, RI 02879 USA
DIRECTOR	PAUL COLLINS	167 GAUTHIER DRIVE WOONSOCKET, RI 02895 USA
DIRECTOR	PEG COLLINS	125 HAMPTON WAY SOUTH KINGSTOWN, RI 02879 USA
DIRECTOR	ALIX CAVAS	95 DENDRON ROAD SOUTH KINGSTOWN, RI 02879 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**

AMY E. STRATTON, ESQ. 4 RICHMOND SQUARE, SUITE 150 PROVIDENCE , RI 02906

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

Signed this 27 Day of July, 2020 at 9:43:00 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 MARK COLLINS
Signature of Authorized Person

Form No. 631
Revised 09/07