



**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.** 000736958

**2. Name of Corporation** Stephen Hopkins Center for Civil Rights

**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

813311

**4. Principal Office Address**

No. and Street: 301 PROMENADE STREET

City or Town: PROVIDENCE

State: RI

Zip: 02908

Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:

City or Town: State: Zip: Country:

**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**

TO ENFORCE STATE AND FEDERAL CONSTITUTIONAL RIGHTS INCLUDING BUT NOT LIMITED TO FREE SPEECH PROPERTY AND LIBERTY THROUGH LITIGATION  
EDUCATION PUBLIC OUTREACH

**6. Names and Addresses of the Officers and Directors:**

**All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island**

Corporation shall not be less than 3.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	MATTHEW FABISCH	PO BOX 17213 ESMOND, RI 02917 USA
DIRECTOR	GIOVANNI D. CICIONE	301 PROMENADE STREET PROVIDENCE, RI 02908 USA
DIRECTOR	MATTHEW FABISCH	PO BOX 17213 ESMOND, RI 02917 USA
DIRECTOR	ROBERT J. COUPE	17 BRIAR HILL DRIVE CRANSTON, RI 02921 USA

**7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

GIOVANNI D. CICIONE, ESQ. C/O GIOVANNI D CICIONE ESQ. 86 FERRY LANE BARRINGTON , RI  
02806

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

**Signed this 1 Day of March, 2021 at 7:22:03 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 GIOVANNI D CICIONE ESQ.  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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