



**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

**Foreign Non-Profit
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: 2021

1. Corporate ID No. 000023250

2. Name of Corporation WIDE HORIZONS FOR CHILDREN, INC.

3. State of Incorporation

State: MA

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. Principal Office Address

No. and Street: 341 BROADWAY

C/O WHFC

City or Town: PROVIDENCE

State: RI

Zip: 02909

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

CHILD PLACEMENT, CHARITABLE AND EDUCATIONAL

6. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JANICE HOFFMAN	C/O WHFC 375 TOTTEN POND ROAD, SUITE 400 WALTHAM, MA 02451 USA
TREASURER	CHRISTOPHER CONWAY	375 TOTTEN POND ROAD SUITE 400 WALTHAM, MA 02451 USA
CHAIRPERSON	PAUL CONDRIN	375 TOTTEN POND RD, SUITE 400 WALTHAM, MA 02451 USA
VICE CHAIRPERSON	JENNIFER GILL DR.	375 TOTTEN POND RD. SUITE 400 WALTHAM, MA 02451 USA
DIRECTOR OF FAMILY SERVICES	MARYANNE LUDWIG	375 TOTTEN POND ROAD, SUITE 400A WALTHAM, MA 02451 USA
DIRECTOR OF INTERNATIONAL PROGRAMS	SARAH MRAZ	375 TOTTEN POND ROAD, SUITE 400A WALTHAM, MA 02451 USA
DIRECTOR OF ORPHAN PREVENTION & ORPHAN C	DEBBIE MANSFIELD	375 TOTTEN POND ROAD, SUITE 400A WALTHAM, MA 02451 USA
DEVELOPMENT COORDINATOR	LINDSEY DEGOLAN	375 TOTTEN POND ROAD, SUITE 400A WALTHAM, MA 02451 USA
CLERK	ANNEMARIE HILL	375 TOTTEN POND ROAD, SUITE 400A WALTHAM, MA 02451 USA
DIRECTOR	TIMOTHY PECCI	C/O WHFC 375 TOTTEN POND ROAD, SUITE 400 WALTHAM, MA 02451 USA
DIRECTOR	ROWAN WILSON	C/O 375 TOTTEN POND RD., SUITE 400 WALTHAM , MA 02451 USA
DIRECTOR	CLAUDIA CORRA	C/O WHFC 375 TOTTEN POND ROAD, SUITE 400 WALTHAM, MA 02451 USA
DIRECTOR	KATHLEEN REDGATE	C/O WHFC 375 TOTTEN POND ROAD, SUITE 400 WALTHAM, MA 02451 USA
DIRECTOR	RICHARD PATERNITI	C/O WHFC 375 TOTTEN POND ROAD, SUITE 400 WALTHAM, MA 02451 USA
DIRECTOR	MICHAEL MYERS	C/O WHFC 375 TOTTEN POND ROAD, SUITE 400 WALTHAM, MA 02451 USA
DIRECTOR	REBECCA WINOKUR	C/O WHFC 375 TOTTEN POND ROAD, SUITE 400 WALTHAM, MA 02451 USA
DIRECTOR	BILL ADAMS	375 TOTTEN POND ROAD SUITE 400 WALTHAM, MA 02451 USA
DIRECTOR	RON ALLEN	375 TOTTEN POND ROAD SUITE 400 WALTHAM, MA 02451 USA
DIRECTOR	JAYNE MCGRATH	C/O WHFC 375 TOTTEN POND ROAD, SUITE 400 WALTHAM, MA 02451 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

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD. SUITE 200 WARWICK , RI 02888

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

Signed this 21 Day of May, 2021 at 11:15:17 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 JANICE HOFFMAN
Signature of Authorized Person

Form No. 631
Revised 09/07

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