



**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.** 001715794

**2. Name of Corporation** EDREPORTS.ORG INC.

**3. State of Incorporation**

State: DE

**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: PO BOX 51099  
City or Town: DURHAM State: NC Zip: 27717-1099 Country: USA

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

No. and Street: PO BOX 51099  
City or Town: DURHAM State: NC Zip: 27717-1099 Country: USA

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

INCREASE THE CAPACITY OF TEACHERS, ADMINISTRATORS AND LEADERS TO SEEK, IDENTIFY AND DEMAND THE HIGHEST QUALITY INSTRUCTIONAL MATERIALS. DRAWING UPON EXPERT EDUCATORS, OUR REVIEWS OF INSTRUCTIONAL MATERIALS AND SUPPORT OF SMART ADOPTION PROCESSES EQUIP TEACHERS WITH EXCELLENT MATERIALS NATIONWIDE.

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

**All officers and directors must be listed.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	DR MARIA KLAWE	301 E PLATT BOULEVARD CLAREMONT, CA 91711 USA
TREASURER	MICHAEL HYDE	2420 FALLS RIVER AVE RALEIGH, NC 27614 USA
SECRETARY	PETER TANG	1207 18TH AVE SOUTH, STE 326 NASHVILLE, TN 37212 USA
VICE PRESIDENT	DR. SONJA SANTELISES	200 E NORTH AVE BALTIMORE, MD 21202 USA
DIRECTOR	DANA NERENBERG	126 NE FARGO ST PORTLAND, OR 97212 USA
DIRECTOR	KISHA DAVIS-CALDWELL	1525 WILSON BLVD, STE 700 ARLINGTON, VA 22209 USA
DIRECTOR	AUDRA MCPHILLIPS	22 ISLAND RD EAST FREETOWN, MA 02717 USA
DIRECTOR	DARREN BURRIS	12 GREENHILL LANE WYNNEWOOD, PA 19096 USA
DIRECTOR	LAUREN STUART	14000 VALLEYHEART DR SHERMAN OAKS, CA 91423 USA
DIRECTOR	K. SUE REDMAN	902 CROOKED STICK COLLEGE STATION, TX 77845 USA
DIRECTOR	KATHLEEN MCGEE	1251 6TH AVE. NEW YORK, NY 10020 USA
DIRECTOR	LIZ SIMON	83 DOUGLASS ST. APT 3 NEW YORK, NY 11231 USA
DIRECTOR	SARA ALLAN	1432 ELLIOTT AVE W. SEATTLE, WA 98119 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**

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST  
PROVIDENCE , RI 02914

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

**Signed this 4 Day of June, 2021 at 11:31:02 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 DR. MARIA KLAWE  
Signature of Authorized Person

© 2007 - 2021 State of Rhode Island  
All Rights Reserved