



**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. 000525668

2. Name of Corporation Katie Brown Educational Program, 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: 209 BEDFORD STREET
SUITE 302

City or Town: FALL RIVER State: MA Zip: 02720 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

EDUCATIONAL PROGRAM PROVIDES AN INNOVATIVE RELATIONSHIP VIOLENCE PREVENTION PROGRAM TO STUDENTS IN PUBLIC, PRIVATE AND PAROCHIAL SCHOOL SETTINGS.

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	MIKE MARTIN	180 PRESIDENT AVENUE FALL RIVER, MA 02720 USA
TREASURER	ANN RAMOS DESROSIERS	330 SWANSEA MALL DRIVE SWANSEA, MA 02777 US
CLERK	SUSAN JENKINSON	15 HIGHLAND VIEW ROAD CUMBERLAND, RI 02865 USA
BOARD MEMBER	JOAN MENARD	4700 NORTH MAIN STREET, UNIT 1J FALL RIVER, MA 02720 USA
BOARD MEMBER	ANDREA SCHACHNE	6 PIERCE COURT BARRINGTON, RI 02806 USA
BOARD MEMBER	TOBY SIMON	21 MOSES BROWN STREET PROVIDENCE, RI 02906 USA
CHAIRMAN	JAY SCHACHNE	1030 PRESIDENT AVENUE FALL RIVER, MA 02720 USA
BOARD MEMBER	MARK COSTA	343 KENYON STREET FALL RIVER, MA 02720 USA
DIRECTOR	CLAIRE S. MCVICKER	209 BEDFORD STREET FALL RIVER, MA 02720 UNI

**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**

JAY S. SCHACHNE 6 PIERCE COURT 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 8 Day of June, 2021 at 11:38:49 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 CARRIE E. QUIGLEY
Signature of Authorized Person

Form No. 631
Revised 09/07