



**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. 001669880

2. Name of Corporation Adaptive Technology, 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: 1 JACOB ISLAND WAY
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:

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

THROUGH RESEARCH WITH IMPAIRED PEOPLE REHABILITATE IN HEALTHCARE AND EMPLOYMENT

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 | HAROLD F LYNCH | 1 JACOB ISLAND WAY SOUTH KINGSTOWN, RI 02879 USA |
| VICE PRESIDENT | PAUL J. CHARETTE | 4650 RANCH HOUSE ROAD UNIT 5 NORTH LAS VEGAS, NV 89031 USA |
| DIRECTOR | HAROLD F. LYNCH | 1 JACOB ISLAND WAY SOUTH KINGSTOWN, RI 02879 USA |
| DIRECTOR | PAUL J. CHARETTE | 4650 RANCH HOUSE ROAD UNIT 5 NORTH LAS VEGAS, NV 89031 USA |
| DIRECTOR | ROBERT A LOPES II | 78 ACORN STREET NEW BEDFORD, MA 02740 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

HAROLD F. LYNCH 1 JACOB ISLAND WAY SOUTH KINGSTOWN , RI 02879

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

Signed this 19 Day of June, 2021 at 11:28:52 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 HAROLD F. LYNCH
Signature of Authorized Person

Form No. 631
Revised 09/07