**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:** 2021

**1. Corporate ID No.** 000040984

**2. Name of Corporation** Financial Planning Professionals, Inc.

**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

813920

**4. Principal Office Address**

No. and Street: 2400 POST ROAD
City or Town: WARWICK State: RI Zip: 02886 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 PROVIDE A FORUM TO PROMOTE THE PROFESSIONALISM OF THE DESIGNATION CERTIFIED FINANCIAL PLANNER AND OTHER PROFESSIONAL FINANCIAL PLANNER DESIGNATIONS.

**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<br>First, Middle, Last, Suffix | Address<br>Address, City or Town, State, Zip Code, Country |
|---|---|---|
| PRESIDENT | MACKENZIE RICHARDS | 50 HOLDEN STREET<br>PROVIDENCE , RI 02908 USA |
| PRESIDENT-ELECT | MARA DERDERIAN | 1150 DOUGLAS PIKE<br>SMITHFIELD , RI 02917 USA |
| CHAIRPERSON | JASON SIPERSTEIN | 1000 CHAPEL VIEW BLVD. STE 240<br>CRANSTON, RI 02920 USA |
| TREASURER | GREG YOUNG | 650 TEN ROD ROAD<br>NORTH KINGSTOWN, RI 02852 USA |
| DIRECTOR | DONNA SOWA ALLARD | 14 BREAKNECK HILL ROAD STE 202<br>LINCOLN, RI 02865 USA |
| SECRETARY | HEATHER KENDRA | 1150 NEW LONDON AVENUE STE 100<br>CRANSTON, RI 02920 USA |
| PRO BONO COMMITTEE CHAIR | NATHAN BEAUVAIS | 14 BREAKNECK HILL ROAD STE 202<br>LINCOLN, RI 02865 USA |
| MEMBER ENGAGEMENT CHAIR | JANE MCAULIFFE | 197 WARREN AVENUE STE 203<br>EAST PROVIDENCE , RI 02914 USA |
| DIRECTOR | STEVE JOHNSON | ONE FIRST STREET STE 100<br>LOS ALTOS, CA 94022 USA |
| DIRECTOR | JASON ARCHAMBAULT | 50 HOLDEN STREET<br>PROVIDENCE , RI 02908 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**

MARK A. MALE 2400 POST ROAD WARWICK , RI 02886

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

**Signed this 23 Day of June, 2021 at 10:16:29 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 MARK MALE
Signature of Authorized Person

Form No. 631
Revised 09/07