



**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. 000506635

2. Name of Corporation Camp Surefire Foundation

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

4. Principal Office Address

No. and Street: 290 HOPE STREET
City or Town: BRISTOL State: RI Zip: 02809 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 BENEFIT CHILDREN WITH DIABETES.

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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	GREGORY FOX MD	290 HOPE STREET BRISTOL, RI 02809 USA
TREASURER	RICHARD KEARNS	577 SANDY POINT AVE PORTSMOUTH, RI 02871 USA
SECRETARY	LAUREN GREER	186 OCEAN AVE SOUTH KINGSTON, RI 02879 USA
VICE PRESIDENT	COLLEEN MCCARTHY	45 CUSHING RD. WARWICK, RI 02888 USA
DIRECTOR	ISABELLA CHANNEL	91 PARKWAY DR WARWICK, RI 02886 USA
DIRECTOR	TARA HIGGINS	290 FORGE ROAD NORTH KINGTOWN, RI 02852 USA
DIRECTOR	DAVID SOUZA	30 BROOKDALE ST WARREN, RI 02885 USA
DIRECTOR	DAVID ZAPATKA	20 ARBOR WAY N. KINGSTOWN, RI 02852 USA
DIRECTOR	ANNA BERTORELLI MBA, RD	16 GREAT MEADOWS LN. LINCOLN, RI 02865 USA
DIRECTOR	CARA MOELLER	32 MORGAN CT N. KINGSTOWN , RI 02852 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**

GREGORY A. FOX, MD, FAAP 290 HOPE STREET BRISTOL , RI 02809

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

Signed this 25 Day of June, 2021 at 2:14:52 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 MARILYN R MATHISON
Signature of Authorized Person

Form No. 631
Revised 09/07