RI SOS Filing Number: 202198833880 Date: 6/28/2021 4:00:00 PM

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State of Rhode Island

Department of State - Business Services Division

Annual Report for the year:	2021
Non-Profit Corporation	

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

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JUN 2 8 2621

1. Entity ID Number	2. Exact nam	2. Exact name of the Corporation					
000933115	RI Burn Fou	RI Burn Foundation, Inc.					
3. State of Incorporation	5. Brief desci	5. Brief description of the character of business conducted in Rhode Island					
RI	Promote fire	Promote fire safety, burn prevention, and related activities					
4. NAICS Code	_						
813219 - Other Grantmaking	\Box						
6 Principal Office Address			City	State	Zip		
593 Eddy St. APC 435			Providence	RI	02903		
7. List ALL officers (names and	l addresses)		· · · · · · · · · · · · · · · · · · ·		cate an attachment 🗸		
President Name David Harrington, MD		Vice-President Name Open	Vice-President Name Open Seat				
Street Address 41 Marion St.		Street Address	Street Address				
City East Greenwich	State RI	Zip 02818	City	State	Zıp		
Secretary Name Lynne Benevides		Treasurer Name John Woo	Treasurer Name John Woodard				
Street Address 15 Frances Barber Dr.		Street Address 15 Fireside	Street Address 15 Fireside Dr.				
City Hope Valley	State RI	Zip 02832	City Barrington	State RI	Zip 02806		
8. List ALL directors (names ar	nd addresses). RI (Corporations MUST	list at least THREE directors.	Check the box to indi	cate an attachment		
Director Name Casey O'Rourke		Director Name William Sm	Director Name William Smith				
Street Address 4 Curtis Lane		Street Address 1 Exchange Terrace					
^{City} Franklin	State MA	Zip 02038	City Providence	State RI	Zip 02903		
Director Name Bruce Cooley		Director Name Evan Katz					
Street Address 347 Cove Ave.		Street Address 33 Fowler St.					
^{City} Warwick	State RI	Zip 02889	City Jamestown	State RI	Zip 02835		
9. The Registered Agent inform	nation of record wit	h the RI Departme	nt of State is accurate. Change	es require filing Form 64	1.		
Under penalty of perjury, I destatements, and that all state				y accompanying sched	fules and		
This report must be signed by either the	e President, Vice-Presid	ent, Secretary, Assistant	Secretary, Treasurer, duly Authorized	Representative, Receiver or Tru	ustee.		
Name of Officer/Authorized Ro	presentative			Date			
David Harrington, MD			<u> </u>	160	ine, 2021		
Signature of Officer/Authorized	Representative						

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island D2904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov Additional Directors
Rhode Island Burn Foundation, Inc.
Entity ID # 000933115

Gina Russo 78 Wilbur Ave. Cranston, RI 02920

Joe Pontarelli 85 Lakewood Drive Narragansett, RI 02882

FILED 1UN 2 8 2021
BY 100 PY