



State of Rhode Island and Providence Plantations  
**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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 BUS SVCS DIV

2021 JUL -8 2:34

1. Entity ID Number <b>001657258</b>	2. Exact name of the Corporation <b>Bee In Motion</b>
3. State of Incorporation <b>RI</b>	5. Brief description of the character of business conducted in Rhode Island  <b>To Provide movement therapy instruction as a means for students and young adults of all abilities in the community to explore self-expression and non-verbal communications through movement and music.</b>
4. NAICS Code <b>621340</b>	

6. Principal Office Address <b>56 Maple Ave, Box H-207</b>	City <b>West Warwick</b>	State <b>RI</b>	Zip <b>02893</b>
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7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <b>DENNIS HARVEY</b>		Vice-President Name <b>Judy Niedbala - Member at Large</b>	
Street Address <b>56 Maple Ave, Box H-207</b>		Street Address <b>1130 Ten Rod Road, Ste B101</b>	
City <b>West Warwick</b>	State <b>RI</b>	Zip <b>02893</b>	City <b>North Kingstown</b>
			State <b>RI</b>
			Zip <b>02852</b>
Secretary Name <b>Adam Harvey</b>		Treasurer Name	
Street Address <b>397 Willard Avenue</b>		Street Address	
City <b>Providence</b>	State <b>RI</b>	Zip <b>02878</b>	City
			State
			Zip

8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name <b>ROGER MARK MONK</b>		Director Name	
Street Address <b>145 MASSASOIT DRIVE</b>		Street Address	
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02888</b>	City
			State
			Zip
Director Name <b>Kristin Blasbalg</b>		Director Name <b>Susan L Hartnett LICSW</b>	
Street Address <b>70 Whitman Drive</b>		Street Address <b>2521 B Post Road</b>	
City <b>Wakefield</b>	State <b>RI</b>	Zip <b>02852</b>	City <b>Wakefield</b>
			State <b>RI</b>
			Zip <b>02879</b>

9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.

**Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.**

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

Name of Officer/Authorized Representative <b>Dennis Harvey</b>	Date <b>7/8/2021</b>
Signature of Officer/Authorized Representative <i>Dennis Harvey</i>	

MAIL TO:  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

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 BY **CA TSASP** FORM 631 - Revised: 03/2019