



**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. 001697861

2. Name of Corporation South Kingstown Wellness

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: 215 COLUMBIA STREET

City or Town: WAKEFIELD

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

THE CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, EDUCATIONAL, AND SCIENTIFIC PURPOSES AS SPECIFIED IN SECTION 501 (C)(3) OF THE INTERNAL REVENUE CODE, INCLUDING FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, OR THE CORRESPONDING

SECTION OF ANY FUTURE FEDERAL TAX CODE.
THE SPECIFIC PURPOSE OF THE CORPORATION IS TO EDUCATE, EQUIP, AND EMPOWER
THE SOUTH KINGSTOWN COMMUNITY TO MAKE POSITIVE LIFESTYLE CHOICES THAT
SUPPORT HEALTH AND WELLNESS.
THE CORPORATION SHALL NOT BE CONDUCTED OR OPERATED FOR PROFIT AND NO PART
OF THE NET EARNINGS OF THE CORPORATION SHALL INURE TO THE BENEFIT OF ANY
INDIVIDUAL, NOR SHALL ANY OF THE PROFITS OR ASSETS OF THE CORPORATION BE
USED OTHER THAN FOR PURPOSES OF THE CORPORATION.

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	CARRIE BROWN	14 GREYBIRCH COURT S. KINGSTOWN, RI 02879 USA
TREASURER	MARCIA SUE IZZI	33 GLENWOOD CIRCLE SOUTH KINGSTOWN, RI 02879 USA
SECRETARY	LINSDAY MADOM	26 E. HILL WAY WAKEFIELD, RI 02879 USA
DIRECTOR	ERICA ESTUS	71 PAUL STREET SOUTH KINGSTOWN , RI 02879 USA
DIRECTOR	CRAIG E STANLEY	1790 KINGSTOWN ROAD SOUTH KINGSTOWN, RI 02879 USA
DIRECTOR	LAUREN WEINSTOCK PHD	345 BLACKSTONE BLVD. PROVIDENCE, RI 02906 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

CRISTINA M. OFFENBERG, ESQ. 1100 AQUIDNECK AVE MIDDLETOWN , RI 02842

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

Signed this 12 Day of July, 2021 at 2:33:45 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 MARCIA IZZI
Signature of Authorized Person

Revised 09/07

© 2007 - 2021 State of Rhode Island
All Rights Reserved