



**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.** 000103008

**2. Name of Corporation** Association of Certified Fraud Examiners, Rhode Island Chapter, 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

**4. Principal Office Address**

No. and Street: P.O. BOX 6671  
City or Town: PROVIDENCE State: RI Zip: 02940 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**

PROMOTION OF FRAUD DETERRENCE AND DETECTION AND THE FOSTERING OF SKILLS IN THE DISCIPLINES OF ACCOUNTING, AUDITING, CRIMINOLOGY, INVESTIGATION, LAW, AND ETHICS.

**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.

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	EVAN LEMOINE	903 PROVIDENCE PLACE, #451 PROVIDENCE, RI 02903 USA
TREASURER	NURIBEL PENA	28 PEREZ STREET ATTLEBORO, MA 02703 USA
SECRETARY	AIMEE FENNESSEY	179 HUDSON POND ROAD WEST GREENWICH, RI 02817 USA
VICE PRESIDENT	JEAN LEHMAN	17 GARDEN STREET WARWICK, RI 02888 USA
DIRECTOR	LAINA BOROWSKI	3 VALLEY DRIVE JOHNSTON, RI 02919 USA
DIRECTOR	LIA BENEVIDES	6 KING PHILIP AVENUE BARRINGTON, RI 02809 USA
DIRECTOR	JENNA REMILLARD	297 MARSTON RD WHITINSVILLE, MA 01588 USA
DIRECTOR	SUZANNE BOVE	57 RAY ROAD WRENTHAM, MA 02093 USA
DIRECTOR	REBECCA FERRIERA	776 DARTMOUTH ST DARTMOUTH, MA 02748 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**

PAUL D. RAGOSTA ONE TURKS HEAD PLACE, SUITE 1450 PROVIDENCE , RI 02903

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

**Signed this 22 Day of July, 2021 at 3:05:35 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 AIMEE S. FENNESSEY  
Signature of Authorized Person

Form No. 631  
Revised 09/07