



**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. 000107141

2. Name of Corporation RHODE ISLAND SERVICE COORDINATOR COLLABORATIVE (RISCC)

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



813920

4. Principal Office Address

No. and Street: 204 GREENVILLE AVENUE

City or Town: JOHNSTON

State: RI

Zip: 02919

Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 44 WASHINGTON STREET

City or Town: PROVIDENCE

State: RI

Zip: 02903

Country: UNI

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

EDUCATION AND TRAINING OF RESIDENT SERVICES COORDINATORS. EXCLUSIVELY FOR CHARITABLE RELIGIOUS EDUCATIONAL AND SCIENTIFIC PURPOSES TO SUPPORT ALL RI RESIDENT SERVICE COORDINATORS THROUGH EDUCATION ADVOCACY AND AS A LINK TO NECESSARY RESOURCES AND COMMUNITY RELATIONSHIPS THAT FURTHER ENHANCE THE RESIDENT SERVICES PROGRAM IN ELDERLY DISABLED AND FAMILY HOUSING

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	NICOLE REDDY	204 GREENVILLE AVE JOHNSTON, RI 02919 USA
TREASURER	MANUEL JOHN GONCALVES	75 EAST AVENUE OFFICE PAWTUCKET, RI 02860 USA
SECRETARY	ELIZABETH BODE	369 MONTGOMERY AVE. PROVIDENCE, RI 02905 USA
VICE PRESIDENT	AMY ALBA	847 PARK STREET ATTLEBORO, MA 02703 USA
DIRECTOR	ZOILA MEDINA	700 WESTMINSTER ST PROVIDENCE, RI 02903 USA
DIRECTOR	REBECCA CRUZ	570 CRANSTON ST PROVIDENCE, RI 02907 USA
DIRECTOR	JANINE KENT	44 WASHINGTON ST PROVIDENCE, RI 02903 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

RHODE ISLAND CENTER FOR LAW AND PUBLIC POLICY INC 3288 POST ROAD WARWICK , RI
02886

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

Signed this 7 Day of August, 2021 at 1:02:03 AM 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 MANUEL JOHN GONCALVES
Signature of Authorized Person

Form No. 631
Revised 09/07