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. 001663941

2. Name of Corporation Dysautonomia Support Network

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

813212

4. Principal Office Address

No. and Street: 140 PITTMAN STREET UNIT 106
City or Town: PROVIDENCE State: RI Zip: 02906 Country: USA

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

EXCLUSIVELY FOR CHARITABLE RELIGIOUS EDUCATIONAL PURPOSES WITHIN THE MEANING OF SECTION 501 C3 OF THE INTERNAL REVENUE CODE OF 1986

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	BROOKE OSHEA	624 DEFOREST ROAD COPELL , TX 75019 USA

TREASURER	ASHLEY COLLINS	140 PITMAN STREET UNIT 106 PROVIDENCE, RI 02906 USA
SECRETARY	MARTHA ROSS	19 OVERHILL DRIVE TROPHY CLUB, TX 76262 USA
VICE PRESIDENT	JOANNA BEHM	340 LARTRY DRIVE RED LION , PA 17356 USA
DIRECTOR	CATHY MURDICK	160 RETREAT ROAD BLUEMONT , VA 20135 USA
DIRECTOR	KEVIN MCGRAIL	10311 CASCADE LN FAIRFAX, VA 22032 USA
DIRECTOR	PATRICIA MEEGAN	195 ARLINGTON AVE WARWICK, RI 02889 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

ASHLEY COLLINS 140 PITMAN STREET UNIT 106 PROVIDENCE , RI 02906

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

Signed this 28 Day of September, 2021 at 4:24:02 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 ASHLEY COLLINS
Signature of Authorized Person

Form No. 631
Revised 09/07