



**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. 001694178

2. Name of Corporation Michael Lorenzen Foundation, 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: C/O 931 JEFFERSON BOULEVARD
SUITE 2004

City or Town: WARWICK State: RI Zip: 02886 Country: USA

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

SAID CORPORATION IS ORGANIZED WITHOUT CAPITAL STOCK AND IS ORGANIZED AND SHALL BE OPERATED EXCLUSIVELY FOR ONE OR MORE OF THE FOLLOWING PURPOSES: RELIGIOUS, CHARITABLE, SCIENTIFIC, TESTING FOR PUBLIC SAFETY, LITERARY, OR EDUCATIONAL PURPOSES, AS SPECIFIED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE OF 1986 (OR THE CORRESPONDING PROVISION OF ANY FUTURE UNITED STATES INTERNAL REVENUE LAW AND THE REGULATIONS PROMULGATED THEREUNDER (THE CODE). SUCH PURPOSES SHALL BE FURTHERED BY ACTIVITIES, WHICH INCLUDE, BUT ARE NOT LIMITED TO: (A) GRANTING EDUCATION SCHOLARSHIPS FOR CHILDREN DIAGNOSED WITH AUTISM; AND (B) TRANSACTING ANY OTHER LAWFUL ACTIVITY OR BUSINESS IN WHICH CORPORATIONS MAY BE ENGAGED UNDER THE RHODE ISLAND NON-PROFIT

CORPORATION ACT AS IN EFFECT FROM TIME TO TIME.

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 |
|--------------|---|---|
| INCORPORATOR | KELLIE LORENZEN | 21 PARTRIDGE DR. EXETER, RI 02822 USA |
| DIRECTOR | SARAH GAGNE | 606 VICTORY HIGHWAY WEST GREENWICH, RI 02817 USA |
| DIRECTOR | ALEXANDRA CLARK | 110 BIRCHWOOD DRIVE WAKEFIELD, RI 02879 USA |
| DIRECTOR | TORI GANIMIAN | 33 HORNBEAM RD. COVENTRY, RI 02816 USA |
| DIRECTOR | KELLIE LORENZEN | 21 PARTRIDGE DR. EXETER, RI 02822 USA |
| DIRECTOR | CHANDRA DUSSEAULT | 58 ALLARD ST. CRANSTON, RI 02920 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

EVERETT A. PETRONIO, JR., ESQ. 931 JEFFERSON BOULEVARD, SUITE 2004 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 26 Day of October, 2021 at 7:48:55 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 /S/ EVERETT A. PETRONIO, JR., ESQ.
Signature of Authorized Person

Form No. 631
Revised 09/07

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