



**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: February 1 - May 1

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: 2022

1. Corporate ID No. 000550909

2. Name of Corporation Baby Steps, 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: 19 BROADWAY
City or Town: NEWPORT State: RI Zip: 02840 Country: USA

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

EDUCATE PARENTS WITH THE KNOWLEDGE AND SKILLS TO PREPARE THEIR CHILDREN FOR SUCCESSFUL ENTRY INTO PRE KINDERGARTEN SCHOOL PROGRAMS

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 & CEO	DENNIS ROY	C/O EBCAP 19 BROADWAY NEWPORT, RI 02840 USA

VP & CFO	JOSEPH JUDGE	C/O EBCAP 19 BROADWAY NEWPORT, RI 02840 USA
VP OF FAMILY DEVELOPMENT	RITA CAPOTOSTO	C/O EBCAP 100 BULLOCKS PT AVE RIVERSIDE, RI 02915 USA
VP OF HUMAN RESOURCES	NORMA CONLEY	C/O EBCAP 610 WAMPANOAG TRAIL RIVERSIDE, RI 02915 USA
TREASURER	DAVID BEBYN	21 DRYDEN LANE PROVIDENCE, RI 02904 USA
CHAIRPERSON	JAMES VINCENT	577 SCITUATE AVE CRANSTON, RI 02921 USA
SECRETARY	ANNETTE RICHARDSON	240 TAUNTON AVE EAST PROVIDENCE, RI 02914 USA
VICE CHAIRPERSON	JANE KOSTER	449 WEST REACH DRIVE JAMESTOWN, RI 02835 USA
DIRECTOR	JESSICA CALVINO	889 HOPE STREET BRISTOL, RI 02809 USA
DIRECTOR	JUDITH CAMPBELL	186 HOPE STREET BRISTOL, RI 02809 USA
DIRECTOR	ED CARUSI	10 COURT STREET BRISTOL, RI 02809 USA
DIRECTOR	JULIE CHALUE	282 COUNTRY RD BARRINGTON, RI 02806 USA
DIRECTOR	KATHY CHARBONNEAU	PO BOX 450 NEWPORT, RI 02840 USA
DIRECTOR	GREGORY DIAS	349 WARREN AVE EAST PROVIDENCE, RI 02914 USA
DIRECTOR	LUCIA FONTES-BORTS	209 TERRACE DRIVE RIVERSIDE, RI 02915 USA
DIRECTOR	JEYSON GALVEZ	11 DUDLEY AVE S MIDDLETOWN, RI 02842 USA
DIRECTOR	BARBARA HASKELL	PO BOX 516 JAMESTOWN, RI 02835 USA
DIRECTOR	JULIANNE MCCARTHY	23 CHARLOTTE DRIVE BRISTOL, RI 02809 USA
DIRECTOR	LAURIE SIMONDS	3065 MENDON RD CUMBERLAND, RI 02864 USA
DIRECTOR	JOHN TAYLOR	PO BOX 510 PORTSMOUTH, RI 02817 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**

DENNIS ROY 19 BROADWAY NEWPORT , RI 02840

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

Signed this 25 Day of April, 2022 at 1:38:54 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 **BERNADETTE DOLLINGER**

Signature of Authorized Person

Form No. 631
Revised 09/07

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