



**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.** 000051573

**2. Name of Corporation** Mentor Rhode Island: The RI Mentoring Partnership, 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  
624110

**4. Principal Office Address**

No. and Street: 2065 WARWICK AVENUE  
UNIT 1

City or Town: WARWICK State: RI Zip: 02889 Country: USA

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

TO EDUCATE DEVELOP OPERATE FUND AND SUPPORT CHARITABLE AND EDUCATIONAL PROGRAMS AND PROJECTW WHICH WILL ENHANCE EDUCATIONAL OPPORTUNITES FOR THE YOUTH OF RHODE ISLAND THROUGH MENTORING TO IMPROVE THE LIVES AND WELLBEING OF OUR CHILDREN

**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	JO-ANN SCHOFIELD	36 JANET DRIVE WARWICK, RI 02886 USA
TREASURER	KYLE PETERSON	3 FREEDOM WAY WALPOLE, MA 02081 USA
VICE CHAIR	JANNEL HILL	PO BOX 3690 PAWTUCKET, RI 02861 USA
CHAIR	BRENDAN AHEARN	1 JOYCE GLEN STREET WARWICK, RI 02886 USA
SECRETARY	LINDSAY HAMILTON,ESQ.	117 WASHINGTON STREET NEWPORT, RI 02840 USA
DIRECTOR	RHONDA DUCKWORTH	7625 POST ROAD NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	LAURA PISATURO, ESQ.	94 APPLE TREE LANE WARWICK, RI 02888 USA
DIRECTOR	MONIKA SOBAN	91 WESTMORELAND LANE SAUNDERSTOWN, RI 02874 USA
DIRECTOR	MELISSA LABRECQUE	95 WOODBURY ST PROVIDENCE, RI 02906 USA
DIRECTOR	CHRISTINE WILSON	83 CAPRON FARM DR WARWICK, RI 02886 USA
DIRECTOR	MILAGROS PILLA	189 PROVIDENCE ST WEST WARWICK, RI 02893 USA
DIRECTOR	CHRISTINA MARKRUSH	50 STUDLEY AVENUE WARWICK, RI 02889 USA
DIRECTOR	JOCELYN MURTA	33 PRISCILLA DR BARRINGTON, RI 02806 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**

JO-ANN SCHOFIELD 2065 WARWICK AVE UNIT 1 WARWICK , RI 02889

**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 July, 2022 at 9:40:04 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 JO-ANN SCHOFIELD  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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