



**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

**Foreign Non-Profit
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: 2023

1. Corporate ID No. 000056526

2. Name of Corporation NORTH AMERICAN FAMILY INSTITUTE, INC.

3. State of Incorporation

State: MA

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: 1775 BALD HILL ROAD, UNIT 1

City or Town: WARWICK

State: RI Zip: 02886 Country: USA

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

TO PROVIDE COMPREHENSIVE TREATMENT TO ADOLESCENTS AND ADULTS
COMMITTED TO THE STATE OF RI

6. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
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TREASURER	PAMELA ROCHA	47 GLEN MEADOW RD HAVERHILL, MA 01835 USA
CHAIRMAN OF THE BOARD	HOWARD RICH	289 OCEAN AVENUE MARBLEHEAD, MA 01945 USA
PRESIDENT	DR. YITZHAK BAKAL	80 PARK STREET, #22 BROOKLINE, MA 02446- USA
COO	HILDEGARDE PARIS	29 EMERSON WAY CENTERVILLE, MA 02632 USA
DIRECTOR	STEVE HAHN	41 OCEAN AVE MARBLEHEAD, MA 01945 USA
CLERK	BARBARA VINIVK	50 FREEDOM HOLLOW UNIT 118 SALEM, MA 01970 USA
DIRECTOR	KATHERINE TURNER	8 SPARROW LANE EXETER, NH 03833 USA
DIRECTOR	MATT SAGAL	70 WEATHERLY DRIVE, UNIT 301 SALEM, MA 01970 USA
DIRECTOR	JAMES ZAFRIS	53 WARREN STREET UNIT 116 NEWBURYPORT, MA 01950 USA
DIRECTOR	HARVEY LOWELL	47 WACHUSETT DRIVE LEXINGTON, MA 02173 USA
DIRECTOR	BARNEY WEINSTEIN	790 BOYLSTON STREET, APT. 19H BOSTON, MA 02199 USA
DIRECTOR	ROGER MARCORELLE	171 JERSEY STREET MARBLEHEAD, MA 01945 USA
DIRECTOR	DR. NANCY GROSSMAN	44 IRVING STREET, UNIT C CAMBRIDGE, MA 02138 USA
DIRECTOR	MARGARET ZUSKY	234 LOWELL ROAD WELLESLEY, MA 02481 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**

CINDY LIVSEY 501 CENTERVILLE RD. 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 12 Day of January, 2023 at 10:34:29 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 PAMELA ROCHA
Signature of Authorized Person

Form No. 631
Revised 09/07

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