



**State of Rhode Island  
Office of the Secretary of State**

No Fee

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Domestic Non-Profit  
Annual Report - Amended**

Filing Period: February 1 - May 1

*In accordance with R.I.G.L. 7-1.2-1501(e), 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.*

**This form is only to be used to amend the current annual report on file with this office.**

**ANNUAL REPORT YEAR:** 2023

**1. Corporate ID No.** 001338408

**2. Name of Corporation** Rhode Island Coalition For Children & Families Education Fund, Inc.

**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

813319

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 623 ATWELLS AVE 2ND FLOOR

City or Town: PROVIDENCE

State: RI Zip: 02909 Country: USA

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

PROVIDING PUBLIC EDUCATION AND TRAINING, ENGAGING IN RESEARCH AND CONDUCTING RELATED ACTIVITIES TO PROMOTE THE WELL BEING OF CHILDREN YOUTH AND FAMILIES

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed. If officers and/or directors have been elected, the title**

**Incorporator is no longer applicable; please delete**

**THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3).  
R.I.G.L.  
7-6-23**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	DARLENE ALLEN	12 EXETER ST PROVIDENCE, RI 02906 USA
SECRETARY	LAURI SMALLS	801 ELMWOOD AVE PROVIDENCE, RI 02907 USA
VICE PRESIDENT	CARLENE CASCIANO-MCCANN	420 FRUITHILL AVE N. PROVIDENCE, RI 02911 USA
DIRECTOR	LYNN BISHOP	20 BATTERSON PARK RD FARMINGTON, CT 06032 USA
TREASURER	FERNANDO MUNIZ	340 WEST NEWBERRY RD BLOOMFIELD, CT 06002 USA
DIRECTOR	BRIAN SULLIVAN	635 OCEAN RD NARRAGANSETT, RI 02882 USA
DIRECTOR	CRAIG GORDON	49 WHITE AVE RIVERSIDE, RI 02915 USA
DIRECTOR	MICHAEL PEARIS	610 MANTON AVE PROVIDENCE, RI 02909 USA
DIRECTOR	MARGARET HOLLAND-MCDUFF	PO BOX 6688 PROVIDENCE, RI 02940 USA
DIRECTOR	CAROLYN SOUZA	438 E. MAIN RD MIDDLETOWN, RI 02842 USA
DIRECTOR	SEENA FRANKLIN	310 DORIC AVE CRANSTON, RI 02910 USA
DIRECTOR	PATRICIA ST.GERMAIN	623 ATWELLS AVE SUITE 201 PROVIDENCE, RI 02909 USA
DIRECTOR	VANESSA VOLZ	386 SMITH STREET PROVIDENCE, RI 02908 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

TANJA KUBAS-MEYER 623 ATWELLS AVENUE, 2ND FLOOR PROVIDENCE , RI 02909

**Signed this 6 Day of February, 2023 at 11:31:20 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 TANJA KUBAS-MEYER  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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