



**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: 2023

1. Corporate ID No. 000509677

2. Name of Corporation FOGARTY MEMORIAL PARENT TEACHER ORGANIZATION

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
611110

4. Principal Office Address

No. and Street: 736 SNAKE HILL ROAD
City or Town: NORTH SCITUATE State: RI Zip: 02857 Country: USA

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

FUNDRAISING TO SUPPORT STUDENT ACTIVITIES.

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
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PRESIDENT	ELISE CORMIER	25 FRANCIS ROAD NORTH SCITUATE, RI 02857 USA
TREASURER	ANASTASIA S WACHTER	67 ANGEL ROAD CHEPACHET, RI 02814 USA
SECRETARY	LINDSEY STEVENS	37 CODY DRIVE NORTH SCITUATE, RI 02857 USA
VICE PRESIDENT	AMANDA GODDARD	248 SPRING GROVE DRIVE CHEPACHET, RI 02814 USA
DIRECTOR	ELISE CORMIER	25 FRANCIS ROAD NORTH SCITUATE, RI 02857 USA
DIRECTOR	LINDSEY STEVENS	37 CODY DRIVE NORTH SCITUATE, RI 02857 USA
DIRECTOR	ANASTASIA S WACHTER	67 ANGEL RD CHEPACHET, RI 02814 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**

LYNN MCCORMICK 736 SNAKE HILL ROAD NORTH SCITUATE , RI 02857

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

Signed this 13 Day of February, 2023 at 2:41:04 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 ANASTASIA WACHTER
Signature of Authorized Person

Form No. 631
Revised 09/07

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