



**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.** 000031822

**2. Name of Corporation** James L. Maher Center

**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

623210

**4. Principal Office Address**

No. and Street: 906 AQUIDNECK AVENUE

City or Town: MIDDLETOWN

State: RI

Zip: 02842

Country: USA

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

ASSIST INDIVIDUALS WITH DEVELOPMENTAL DISABILITIES

**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	JOHN S CASEY	59 OSPREY COURT MIDDLETOWN, RI 02842 USA
TREASURER	SHEILA A HAGAN	53 BRANDON RD CRANSTON, RI 02910 USA
SECRETARY	BARBARA A BURNS	8 OSPREY COURT MIDDLETOWN, RI 02842 USA
DIRECTOR	DEVON COSTA	233 METACOM AVE BRISTOL, RI 02809 USA
DIRECTOR	KARA MURPHY	136 CARROLL AVENUE NEWPORT, RI 02840 USA
VICE PRESIDENT	LOUIS MURPHY	136 CARROLL AVENUE NEWPORT, RI 02840 USA
DIRECTOR	FRANK VARGAS	5 HAWTHORNE AVENUE BRISTOL, RI 02809 USA
DIRECTOR	SEAN CASEY	1012 ANTHONY ROAD PORTSMOUTH, RI 02871 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**

LYNNE MAHER 906 AQUIDNECK AVENUE MIDDLETOWN , RI 02842

**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 2:53:01 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 CATHI FOURNIER  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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