



**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. 000029988

2. Name of Corporation Frank Olean Center, 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

624120

4. Principal Office Address

No. and Street: 93 AIRPORT ROAD

City or Town: WESTERLY

State: RI

Zip: 02891

Country: USA

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

TO PROMOTE GENERAL WELFARE AND PROVIDE SERVICE TO THE MENTALLY
AND PHYSICALLY DISABLED

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	Address
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	BETHANY LYONS	11 STONY HILL DRIVE MYSTIC, CT 06355 USA
TREASURER	DAVE KMETZ	15 DANIELLE AVE WESTERLY, RI 02891 USA
SECRETARY	EVIE MARTIN	73A QUANNACUT ROAD WESTERLY, RI 02891 USA
DIRECTOR	PAUL YUOF	20 CEDARWOOD DRIVE HOPE VALLEY, RI 02832 USA
VICE PRESIDENT	JOANNA VALENTINI	6 BRASS RING RD WESTERLY, RI 02891 USA
DIRECTOR	WILLIAM NARDONE	38 WICKLOW ROAD WESTERLY, RI 02891 USA
DIRECTOR	JOHN NICOLOSI	160 CLEARVIEW ROAD CHARLESTOWN, RI 02813 USA
DIRECTOR	ANNE WOOD DR.	PO BOX 38 CHARLESTOWN, RI 02813 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

RUTH TURECKOVA 93 AIRPORT ROAD WESTERLY , RI 02891

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

Signed this 1 Day of March, 2023 at 3:02:28 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 BETHANY LYONS
Signature of Authorized Person

Form No. 631
Revised 09/07

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