



State of Rhode Island

Department of State - Business Services Division

FILED

APR 06 2023

BY

Annual Report for the year:
Non-Profit Corporation2023

→ Filing period: February 1 - May 1

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 1746924		2. Exact name of the Corporation Kindling, INC			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Kindling, INC creates educational media, video, materials and documentary content.			
4. NAICS Code 611000					
6. Principal Office Address 287 Ives Road			City Warwick		State RI
					Zip 02818
7. List ALL officers (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
President Name Robert Cunningham			Vice-President Name		
Street Address 287 Ives Road			Street Address		
City Warwick	State RI	Zip 02818	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Robert Cunningham			Director Name Aidan Laliberte		
Street Address 287 Ives Road			Street Address 287 Ives Road		
City Warwick	State RI	Zip 02818	City Warwick	State RI	Zip 02818
Director Name Danielle Carbone			Director Name		
Street Address 42 Armand Way			Street Address		
City Hope	State RI	Zip 02831	City	State	Zip
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</i>					
Name of Officer/Authorized Representative Robert Cunningham				Date 3/1/23	
Signature of Officer/Authorized Representative 					