



**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 - ENTER THE CURRENT YEAR 2024:** 2024

**1. Corporate ID No.** 000029687

**2. Name of Corporation** RHODE ISLAND CHILD SERVICE

**3. State of Incorporation**

State: RI

**NAICS CODE**

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

624110

**4. Principal Office Address**

No. and Street: 153 SUMMER STREET

City or Town: PROVIDENCE

State: RI

Zip: 02903

Country: USA

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

ENACTED BY THE GENERAL ASSEMBLY DURING THE JANUARY SESSION OF 1882  
EFFECTIVE 04/21/1882. SOCIAL SERVICES FOR UNDER PRIVILEGED YOUTH AND  
THEIR FAMILIES.

**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.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
TREASURER	DONALD ST. PETER	95 TELGRAPH HILL ROAD MARSHFIELD, MA 02050 USA
SECRETARY	CHARLOTTE DIFFENDALE	78 PARK AVENUE CRANSTON, RI 02905 USA
ASSISTANT TREASURER	JOHN D. CREGAN	35 N. LAKE DRIVE BARRINGTON, RI 02806 USA
CHAIRMAN	MARK G. GRIFFIN	39 OPAL CIRCLE FRANKLIN, MA 02038 USA
VICE CHAIRWOMAN	MARIE GANIM PH.D.	14 MITRIS BOULEVARD LINCOLN, RI 02865 USA
DIRECTOR	MICHAEL DISANDRO	25 KENTON AVENUE RUMFORD, RI 02916 USA
DIRECTOR	MAUREEN GURGHIGIAN	6 WINGATE ROAD LINCOLN, RI 02865 USA
DIRECTOR	BENJAMIN J. MELLINO	54 VENUS DRIVE EAST GREENWICH, RI 02818 USA
DIRECTOR	ANA ECHEVARRIA DE SAQUIC	864 B. PARK AVENUE CRANSTON, RI 02910 USA
DIRECTOR	KYLE O. MASON	35 RIDGE ROAD WRENTHAM, MA 02093 USA
DIRECTOR	ROSA E. DE CASTILLO	37 MIDVALE AVENUE CRANSTON, RI 02920 USA
DIRECTOR	WILLIAM J. ALLEN	710 NATE WHIPPLE HWY CUMBERLAND, RI 02864 USA
DIRECTOR	KIMBERLY I. MCCARTHY	63 RAWSON ROAD CUMBERLAND, RI 02864 USA
DIRECTOR	EDUARDO E. NAYA	482 GLEN HILL DRIVE SAUNDERSTOWN, RI 02874 USA
DIRECTOR	CARMEN A. MIRABAL	5 JANE STREET NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	MARY CRAM	39 FOLLETT STREET CUMBERLAND, RI 02864 USA
DIRECTOR	KAMILAH AVANT	60 WILLIAMS AVENUE EAST PROVIDENCE, RI 02914 USA
DIRECTOR	EVA C. HULSE-AVILA	196 OLD RIVER RD, UNIT 312 LINCOLN, RI 02865 USA
DIRECTOR	LEONARD L. LOPES	28 BAYLEY STREET, UNIT 501 PAWTUCKET, RI 02860 USA
DIRECTOR	MARTHA NEWCOMB ESQ.	99 WATER STREET, UNIT 308 WARREN, RI 02885 USA
DIRECTOR	BAHJAT Y. SHARIFF	100 CHESTNUT AVENUE NARRAGANSETT, RI 02820 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**

DAVID CAPRIO 153 SUMMER STREET PROVIDENCE , RI 02903

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

**Signed this 15 Day of March, 2024 at 9:44:41 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 MARK G. GRIFFIN

Signature of Authorized Person

Form No. 631  
Revised 09/07

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