



**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

**Foreign Non-Profit
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. 001758416

2. Name of Corporation National Association of State Head Injury Administrators

3. State of Incorporation

State: MO

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

813920

4. Principal Office Address

No. and Street: 25212 METHLEY PLUM PLACE

City or Town: ALDIE

State: VA Zip: 20105 Country: USA

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

TO PROVIDE TECHNICAL ASSISTANCE CONSULTING TO THE STATE OF RHODE ISLAND AND ITS PARTNERS IN SERVING PEOPLE WITH BRAIN INJURIES AND THEIR FAMILIES.

6. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	MAGGIE FERGUSON	321 E 12TH STREET DES MOINES, IA 50319 USA
TREASURER	TRACI BARNEY	PO BOX 142106 SALT LAKE CITY, UT 84114 USA
SECRETARY	APRIL TURNER	602 SOUTH LAWRENCE STREET MONTGOMERY, AL 36104 USA
EXECUTIVE DIRECTOR	REBECCA S. WOLFKIEL	25212 METHLEY PLUM PLACE ALDIE, VA 20105-3190 USA
PRESIDENT-ELECT	DEREK FALES	41 ANTHONY AVENUE, 11 STATE HOUSE STATION AUGUSTA, ME 97405 USA
DIRECTOR	ELIZABETH HARDINK	41 ANTHONY AVENUE, SHS #11 AUGUSTA, ME 04333 USA
DIRECTOR	BETH DAUBER	5030 CHERRY STREET KANSAS CITY, MO 64110 USA
DIRECTOR	STEFANI ODEA	55 WADE AVENUE CATONSVILLE, MD 21228 USA
DIRECTOR	SCOTT POKORNY	3004 MAIL SERVICE CENTER RALEIGH, NC 27699 USA
DIRECTOR	LURIE EHLHARDT POWELL	1147 W 27TH PLACE EUGENE, OR 97405 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

DEBRA L. SHARPE C/O BRAIN INJURY ASSOCIATION OF RHODE ISLAND 1017 WATERMAN AVENUE EAST PROVIDENCE , RI 02914

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

Signed this 29 Day of March, 2024 at 6:30:29 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 REBECCA S. WOLFKIEL
Signature of Authorized Person

Form No. 631
Revised 09/07

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