



**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. 001675721

2. Name of Corporation Hands in Harmony, Inc.

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

621340

4. Principal Office Address

No. and Street: 25 W INDEPENDENCE WAY

SUITE B

City or Town: KINGSTON

State: RI Zip: 02881 Country: USA

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

TO INCREASE ACCESS TO AND AVAILABILITY OF MUSIC THERAPY SERVICES AND OTHER COLLABORATIVE SERVICES

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
DIRECTOR	ROBERT PANOFF	235 BRIDGETOWN ROAD SAUNDERSTOWN, RI 02784 USA
DIRECTOR	ALYSON POWELL	220 FIRST AVENUE EAST GREENWICH, RI 02818 USA
DIRECTOR	JAMES SEYMOUR	11 HARBOR COURT NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	NICOLE OMALLEY	26 VALE COURT WEST GREENWICH, RI 02817 USA
DIRECTOR	LISA AHART	38 SOUTH POND DRIVE COVENTRY, RI 02816 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

NICOLE O'MALLEY 25 W INDEPENDENCE WAY, SUITE B KINGSTON , RI 02881

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

Signed this 12 Day of April, 2024 at 3:24:07 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 KATHERINE LITTLE
Signature of Authorized Person

Form No. 631
Revised 09/07

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