



**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. 000125582

2. Name of Corporation The Compass School

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
611110

4. Principal Office Address

No. and Street: 537 OLD NORTH ROAD

City or Town: KINGSTON

State: RI

Zip: 02881

Country: USA

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

EDUCATION - CHARTER SCHOOL

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
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PRESIDENT	LINSEY TROMBINO	246 LIBERTY ROAD EXETER, RI 02822 USA
SECRETARY	LORI JONES	286 GREENHAVEN RD PAWCATUCK, CT 06379 USA
DIRECTOR	SARAH CRAFT	29 RIVER ST CRANSTON, RI 02905 USA
DIRECTOR	ERIC DIMARIO	101 CONANICUS ROAD NARRAGANSETT, RI 02882 USA
DIRECTOR	DANIELLE BRUNEAU	35 BRIARWOOD HILL RD EXETER, RI 02822 USA
DIRECTOR	MICHAEL HAYES	105 SALISBURY AVE NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	EVAN PREISSER	255 OLD NORTH RD KINGSTON, RI 02881 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

MATTHEW R. PLAIN, ESQ. ONE FINANCIAL PLAZA, 18TH FLOOR 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 24 Day of April, 2024 at 11:35:20 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 MICHAEL COMMENDATORE
Signature of Authorized Person

Form No. 631
Revised 09/07

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