

**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.** 000030178**2. Name of Corporation** THE WHITMARSH CORPORATION**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: 1055 NORTH MAIN STREETCity or Town: PROVIDENCEState: RI Zip: 02904 Country: USA**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**REHABILITATIVE SERVICES FOR ADOLESCENTS.**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

PRESIDENT	JOHN HAYNES	10 CALISTO DR REHOBOTH, MA 02769 USA
TREASURER	CHRISTOPHER GUILLEMETTE	15 WOODLAND RD EAST GREENWICH, RI 02818 USA
SECRETARY	JONATHAN RILEY	56 MOUNTAIN LAUREL WAY NORTH KINGSTOWN, RI 02852 USA
VICE PRESIDENT	JONATHAN RILEY	56 MOUNTAIN LAUREL WAY NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	KEVIN FUSCO	18 JENNIFER LANE FOXBORO, MA 02035 USA
DIRECTOR	DANIEL O'GRADY	5 LONGUE VUE AVE NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	BRUCE CIUMMO	28 SAMOSET AVE BARRINGTON, RI 02806 USA
DIRECTOR	ROBERT LAROCCO	20 KING PHILLIP DR NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	LAUREN JOHNSON	585 SPRING LAKE RD GLENDALE, RI 02826 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**

ROBERT LAROCCO 1055 NORTH MAIN STREET PROVIDENCE , RI 02904

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

**Signed this 25 Day of April, 2024 at 1:53:33 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 ROBERT LAROCCO, LMFT  
Signature of Authorized Person

Form No. 631  
Revised 09/07