



**State of Rhode Island  
Office of the Secretary of State**

**Fee: \$50.00**

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Limited Liability Company  
Annual Report**

*Filing Period: February 1 - May 1*

*In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.*

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

**1. ID No.** 001682502

**2. Exact Name of the Limited Liability Company** The Center for Social Emotional Enrichment, LLC

**3. State of Formation**

State: RI

**NAICS CODE**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

621330

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

A PRIVATE MENTAL HEALTH PRACTICE WHICH OFFERS DIAGNOSIS AND TREATMENT OF MENTAL

EMOTIONAL AND BEHAVIORAL DISORDERS TO CHILDREN AND ADOLESCENTS. PROVIDES SOCIAL

SKILLS DEVELOPMENT GROUP TREATMENT FOR MENTAL HEALTH DISORDERS BROUGHT ABOUT BY

SUCH CAUSES AS MENTAL ILLNESS PHYSICAL AND EMOTIONAL TRAUMA AND STRESS

**5. Principal Office Address**

No. and Street: 111 JOHN STREET  
City or Town: LINCOLN State: RI Zip: 02865 Country: USA

**6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:**

Contact Name:      Contact Title:  
No. and Street: 111 JOHN STREET  
City or Town: LINCOLN State: RI Zip: 02865 Country: USA

**7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

STACY DOMPKOWSKI-MANN 18 CURRAN ROAD CUMBERLAND , RI 02864

**8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).**

**Signed this 28 Day of April, 2024 at 8:18:14 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 § 7-16.*

By STASIA DOMPKOWSKI MANN  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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