



**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.** 000103008

**2. Name of Corporation** Association of Certified Fraud Examiners, Rhode Island Chapter, 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

813920

**4. Principal Office Address**

No. and Street: P.O. BOX 6671

City or Town: PROVIDENCE State: RI Zip: 02940 Country: USA

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

PROMOTION OF FRAUD DETERRENCE AND DETECTION AND THE FOSTERING OF SKILLS IN THE DISCIPLINES OF ACCOUNTING, AUDITING, CRIMINOLOGY, INVESTIGATION, LAW, AND ETHICS.

**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.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	DONTI ROSCITI	1005 DOUGLAS PIKE SMITHFIELD, RI 02917 USA
TREASURER	DAVID GARDINER	12 PASCO CIRCLE WARWICK, RI 02886 USA
SECRETARY	SHINBEY VUE	1 STACEY DRIVE CRANSTON, RI 02920 USA
VICE PRESIDENT	LISA FERREIRA	145 MONTGOMERY ST TIVERTON, RI 02878 USA
DIRECTOR	BARBARA SEILER	27 CRAWFORD ST CRANSTON, RI 02910 USA
DIRECTOR	REBECCA SPECHT	21 FRANCIS ST WARWICK, RI 02889 USA
DIRECTOR	EVAN LEMOINE	903 PROVIDENCE PLACE #451 PROVIDENCE, RI 02903 USA
DIRECTOR	REBECCA FERREIRA	776 DARTMOUTH ST DARTMOUTH, MA 02748 USA
DIRECTOR	LIA BENEVIDES	6 KING PHILIP AVE BRISTOL, RI 02809 USA
DIRECTOR	JENNA REMILLARD	297 MARTSON ROAD WHITINSVILLE, MA 01588 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**

PAUL D. RAGOSTA ONE TURKS HEAD PLACE, SUITE 1450 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 30 Day of April, 2024 at 1:16:31 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 LIA BENEVIDES  
Signature of Authorized Person

Form No. 631  
Revised 09/07