



**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. 000933115

2. Name of Corporation RI Burn Foundation, 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

813219

4. Principal Office Address

No. and Street: 593 EDDY STREET, APC 435

City or Town: PROVIDENCE

State: RI

Zip: 02903

Country: USA

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

PROMOTE FIRE SAFETY AND BURN PREVENTION EDUCATION AND RELATED ACTIVITIES

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	Address
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	DAVID T. HARRINGTON, MD	41 MARION STREET EAST GREENWICH, RI 02818 USA
SECRETARY	LYNNE BENAVIDES	15 FRANCES BARBER DR. HOPE VALLEY, RI 02832 USA
DIRECTOR	CASEY OROURKE	4 CURTIS LANE FRANKLIN, MA 02038 USA
DIRECTOR	GINA RUSSO	78 WILBUR AVE. CRANSTON, RI 02920 USA
DIRECTOR	BRUCE COOLEY	347 COVE AVE. WARWICK, RI 02889 USA
DIRECTOR	WILLIAM SMITH	1 EXCHANGE TERRACE PROVIDENCE, RI 02903 USA
DIRECTOR	EVAN KATZ	33 FOWLER ST. JAMESTOWN, RI 02835 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**

DAVID T. HARRINGTON, MD 593 EDDY STREET, APC 435 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 29 Day of May, 2024 at 3:20:03 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 DAVID HARRINGTON
Signature of Authorized Person

Form No. 631
Revised 09/07