



State of Rhode Island
Department of State - Business Services Division

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SECRETARY OF STATE
CORPORATIONS DIV.

Annual Report for the year: **2024**

2024 JUN 17 PM 3:29

Non-Profit Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 001731536		2. Exact name of the Corporation Riverside Community Care, Inc.			
3. State of Incorporation Massachusetts		5. Brief description of the character of business conducted in Rhode Island Riverside Community Care, Inc. was organized for the purpose of providing behavioral healthcare and human services.			
4. NAICS Code 813219					
6. Principal Office Address 270 Bridge Street, Suite 301			City Dedham	State MA	Zip 02026
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Mr. Vicker V DiGravio III			Vice-President Name		
Street Address 270 Bridge Street, Suite 301			Street Address		
City Dedham	State MA	Zip 02026	City	State	Zip
Secretary Name Melody Mak-Jurkauskas			Treasurer Name Mark Whalen		
Street Address 270 Bridge Street, Suite 301			Street Address 270 Bridge Street, Suite 301		
City Dedham	State MA	Zip 02026	City Dedham	State MA	Zip 02026
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input checked="" type="checkbox"/>					
Director Name Alan Posner			Director Name Cecile Garcin		
Street Address 270 Bridge Street, Suite 301			Street Address 270 Bridge Street, Suite 301		
City Dedham	State MA	Zip 02026	City Dedham	State MA	Zip 02026
Director Name Eddie Klayman			Director Name Eric Morse		
Street Address 270 Bridge Street, Suite 301			Street Address 270 Bridge Street, Suite 301		
City Dedham	State MA	Zip 02026	City Dedham	State MA	Zip 02026
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</small>					
Name of Officer/Authorized Representative Paco Teller					Date 6/19/24
Signature of Officer/Authorized Representative 					

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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JUN 17 2024

BY **DXENN**

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FORM 631- Revised 12/2023

List of Directors Continued:

1. Annette Shine - 270 Bridge St Ste 301 Dedham, MA 02026
2. Ellis Seidman - 270 Bridge St Ste 301 Dedham, MA 02026
3. Frances Arnold - 270 Bridge St Ste 301 Dedham, MA 02026
4. Hao Wang - 270 Bridge St Ste 301 Dedham, MA 02026
5. Jack Connolly - 270 Bridge St Ste 301 Dedham, MA 02026
6. James Hardeman - 270 Bridge St Ste 301 Dedham, MA 02026
7. Jamie Evans - 270 Bridge St Ste 301 Dedham, MA 02026
8. Joseph Wadlinger - 270 Bridge St Ste 301 Dedham, MA 02026
9. Kimberly Herman - 270 Bridge St Ste 301 Dedham, MA 02026
10. Megon Barrow - 270 Bridge St Ste 301 Dedham, MA 02026
11. Rodney Laurenz - 270 Bridge St Ste 301 Dedham, MA 02026
12. Rosemary Anderson - 270 Bridge St Ste 301 Dedham, MA 02026
13. Susan Flannery - 270 Bridge St Ste 301 Dedham, MA 02026