		Rhode Island Secretary of State	Fee: \$20.00	
	Division Of	<b>Business Services</b>		
		River Street		
		e RI 02904-2615		
1630	(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. 000082744				
2. Name of Corporation Connecting for Children and Families, Inc.				
3. State of Incorporation				
State: <u>RI</u>				
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 <u>click here.</u>				
NAICS Code				
<u>624190</u>				
4. Principal Office Address				
No. and Street: 46	HOPE STREET			
City or Town: $WC$	<u>DONSOCKET</u>	State: <u>RI</u> Zip: <u>028</u>	<u>395</u> Country: <u>USA</u>	
5. Brief Description of the Character of the Affairs Conducted in Rhode Island				
IMPROVING THE QUALITY OF FAMILY AND COMMUNITY LIFE IN NORTHERN				
RHODE ISLAND.				
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	
1				

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country	
PRESIDENT	LISA CARCIFERO	CITY OF WOONSOCKET, 169 MAIN STREET WOONSOCKET, RI 02895 USA	
SECRETARY	MEKA HAMILTON	375 WOOD AVENUE WOONSOCKET, RI 02895 USA	
DIRECTOR	SHARON HARMON	568 BERNON STREET WOONSOCKET, RI 02895 USA	
DIRECTOR	NANCY DUFRESNE	BANKRI, 445 PUTNAM PIKE SMITHFIELD, RI 02917 USA	
TREASURER	KATHY OROVITZ	19 FOREST HILL DRIVE NORTH SMITHFIELD, RI 02896 USA	
VICE PRESIDENT	ERICKA MOORE	NEIGHBORHOOD HEALTH PLAN OF RI, 299 PROMENADE S PROVIDENCE, RI 02908 USA	
DIRECTOR	STACEY PHOMMATHETH	270 ELMWOOD AVE. PROVIDENCE, RI 02907 USA	
DIRECTOR	IDA JAGNE	262 SOUTH MAIN STREET WOONSOCKET, RI 02895 USA	
DIRECTOR	KAREN CHIAPPINELLI	100 AMICA WAY LINCOLN, RI 02865 USA	
DIRECTOR	KWANG BAEK	100 FRONT ST., APT. 806 WOONSOCKET, RI 02895 USA	
DIRECTOR	SHAWNEE TAVARES	241 COTTAGE ST. WOONSOCKET, RI 02895 USA	
DIRECTOR	NANCY GIAMBUSSO	EVEN START, 69 MEMORIAL DRIVE WOONSOCKET, RI 02895 USA	
DIRECTOR	CYNTHIA KELLY	42 KILLINEY WOODS MILLVILLE, MA 01529 USA	
DIRECTOR	PATRICK BURNS	112 ELTON ST PROVIDENCE, RI 02906 USA	
DIRECTOR	KEVIN HAZEBROUCK	202 THAYER ST MILLVILLE, MA 01529 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

MEKA HAMILTON 46 HOPE STREET WOONSOCKET , RI 02895

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

**Signed this 26 Day of June, 2024 at 4:25:07 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 JENNIFER RICH

Signature of Authorized Person

Form No. 631 Revised 09/07

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