



**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. 001738115

2. Exact Name of the Limited Liability Company Tom Driscoll 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.

61110

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

AS A LEADING EDTECH PROFESSIONAL LEARNING PROVIDER IN THE UNITED STATES, OUR WORLD-CLASS INSTRUCTORS OFFER A VARIETY OF ONSITE, VIRTUAL, AND SELF-PACED LEARNING OPPORTUNITIES THAT HELP TEACHERS SOLVE THE CHALLENGES THEY FACE IN AN EVER-CHANGING CLASSROOM ENVIRONMENT. WE ACTIVELY ENGAGE AND BUILD RELATIONSHIPS WITH EDUCATORS, SCHOOLS, ORGANIZATIONS, AND BUSINESSES TO PROVIDE INNOVATIVE SOLUTIONS GROUNDED IN RESEARCH-BASED BEST PRACTICES.

5. Principal Office Address

No. and Street: 10 ARBUTUS TRAIL  
City or Town: COVENTRY State: RI Zip: 02816 Country: USA

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

Contact Name: TOM DRISCOLL Contact Title: OWNER  
No. and Street: 10 ARBUTUS TRAIL  
City or Town: COVENTRY State: RI Zip: 02816 Country: USA

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

THOMAS FRANCIS DRISCOLL III 10 ARBUTUS TRL COVENTRY , RI 02816

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

**Signed this 5 Day of July, 2024 at 1:54:49 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 TOM DRISCOLL  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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