



**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. 000110665

2. Name of Corporation SMITHFIELD SENIOR CENTER

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

624120

4. Principal Office Address

No. and Street: 1 WILLIAM J. HAWKINS JR. TRAIL

City or Town: GREENVILLE

State: RI Zip: 02828 Country: USA

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

TO PROVIDE ALL TYPES OF PROGRAMS, CARE, FACILITIES, EQUIPMENT, AND RECREATION FOR SENIOR CITIZENS AND THE ELDERLY AND TO OPERATE A SENIOR CENTER FOR THE IMPLEMENTATION OF ALL TYPES OF SENIOR PROGRAMS.

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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	KAREN ARMSTRONG	1 WILLIAM J. HAWKINS JR. TRAIL SMITHFIELD, RI 02828 USA
TREASURER	RANDY R ROSSI	37 BEECHNUT DR JOHNSTON, RI 02919 USA
DIRECTOR	JOYCE A. DYER	720 PUTNAM PIKE #703 GREENVILLE, RI 02828
VICE PRESIDENT	KATHLEEN MCADAM-PRICKETT	94 WATERMAN AVE JOHNSTON, RI 02919 USA
DIRECTOR	KAREN L ARMSTRONG	117 ARNOLD ST LINCOLN, RI 00865 USA
DIRECTOR	RANDY R ROSSI	37 BEECHNUT DR JOHNSTON, RI 02919 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

SCARLETT CARREIRO 265 CHURCH STREET PASCOAG , RI 02859

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

Signed this 19 Day of August, 2024 at 10:00:52 AM 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 ROBERT CAINE
Signature of Authorized Person

Form No. 631
Revised 09/07

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