



**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 2025: 2025

1. Corporate ID No. 001776524

2. Name of Corporation sail4CMT

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

813319

4. Principal Office Address

No. and Street: 689 MIDDLE RD

City or Town: EAST GREENWICH

State: RI

Zip: 02818

Country: USA

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

RAISING AWARENESS AND FUNDS TO BE USED TO FIND A CURE FOR CHARCOT
MARIE TOOTH DISEASE.

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
INCORPORATOR	JAY MULROONEY	689 MIDDLE RD EAST GREENWICH, RI 02818 USA
DIRECTOR	JAY MULROONEY	689 MIDDLE RD EAST GREENWICH, RI 02818 USA
DIRECTOR	RILEY SPRAGUE	26 WRIGHT LANE JAMESTOWN, RI 02835 USA
DIRECTOR	ELIZA VAN REEN	689 MIDDLE RD EAST GREENWICH, RI 02818 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

JAY MULROONEY 689 MIDDLE RD EAST GREENWICH , RI 02818

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

Signed this 11 Day of January, 2025 at 7:23:50 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 JAY MULROONEY
Signature of Authorized Person

Form No. 631
Revised 09/07

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