



**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. 000097729

2. Name of Corporation LONDON BRIDGE CHILD CARE CENTER, INC.

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

624410

4. Principal Office Address

No. and Street: 107 RODMAN STREET

City or Town: NARRAGANSETT

State: RI

Zip: 02882

Country: US

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

TO PROVIDE DAYCARE AND KINDERGARTEN SERVICES TO LOW AND MODERATE INCOME FAMILIES.

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
PRESIDENT	CATHY KOCAK	57 GOULD PLACE EAST GREENWICH, RI 02818 USA
DIRECTOR	JANET KENNEY	107 RODMAN STREET NARRAGANSETT, RI 02882 US
DIRECTOR	ABBY GENCERELLA	100 TIPPING ROCK EAST GREENWICH, RI 02818 US
DIRECTOR	CHRISTINA ENDICOTT	112 GRANDVIEW EAST GREENWICH, RI 02818 US

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

JANET KENNEY 107 RODMAN STREET NARRAGANSETT , RI 02882

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

Signed this 13 Day of January, 2025 at 12:16:11 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 JANET KENNEY
Signature of Authorized Person

Form No. 631
Revised 09/07

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