RI SOS Filing Number: 202562443800 Date: 1/13/2025 3:29:00 PM



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**: <u>2025</u>

- 1. Corporate ID No. 000485127
- 2. Name of Corporation Middlebridge School, 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 <u>click here.</u>

NAICS Code

611110

4. Principal Office Address

No. and Street: 333 OCEAN ROAD

City or Town: NARRAGANSETT State: RI Zip: 02882 Country: USA

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

TO OPERATE A SCHOOL FOR CHILDREN GRADES 9 TO 12

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
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country

TRUSTEE	ADAM GEIGER MR.	16 DANIEL LANE DIX HILLS, NY 11746 USA
DIRECTOR	JOHN JAY KAUFMAN MR.	37 BORDER DRIVE WAKEFIELD, RI 02880 USA
DIRECTOR	BRIAN GRAFF	28 HILLTOP DR. CHAPPAQUA, NY 10514 USA
DIRECTOR	PAUL HERMAN	81 SYCAMORE AVE MILL VALLEY, CA 94941 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

JOHN KAUFMAN 333 OCEAN ROAD 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 3:31:12 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 KATEY TILLINGHAST

Signature of Authorized Person

Form No. 631 Revised 09/07

© 2007 - 2025 State of Rhode Island All Rights Reserved