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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

Business Corporation Annual Report

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR **2025**: <u>2025</u>

1. Corporate ID No. 000148669

2. Name of Corporation $\underline{\text{CHILD CARE CONSULTANTS AND FACILITIES MANAGEMENT,}}$ INC.

3. Street Address Principal Business Office:

No. and Street: 1201 DOUGLAS PIKE

SUITE 4

City or Town: SMITHFIELD State: RI Zip: 02917 Country: USA

4. Business Phone No.

5. State of Incorporation

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 <u>here.</u> More information on <u>NAICS</u> can be found online.

561210

6. Brief Description of the Character of Business Conducted in Rhode Island

CONSULTANT AND MANAGEMENT COMPANY FOR CHILD CARE FACILITATORS

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country	
PRESIDENT	MARY ANN ANN SHALLCROSS SMITH	6 TWIN RIVER ROAD LINCOLN, RI 02865 USA	
TREASURER	AMY VOGEL	10 WAMPTRAIL CUMBERLAND, RI 02864 USA	
SECRETARY	MARY ANN SHALLCROSS SMITH	6 TWIN RIVER ROAD LINCOLN, RI 02865 USA	
VICE PRESIDENT	RONALD R SMITH	11 BUTTS ROCK ROAD LITTLE COMPTON, RI 02837 USA	
OTHER OFFICER	TRACY CHENEY	,	
DIRECTOR	RONALD R SMITH	11 BUTTS ROCK ROAD LITTLE COMPTON, RI 02837 USA	
DIRECTOR	MARY ANN ANN SHALLCROSS SMITH	6 TWIN RIVER ROAD LINCOLN, RI 02865 USA	

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares	Total Issued and Outstanding Num of
			Number of Shares	Shares
CNP	NV	\$0.0000	90.00	0
CNP	VOT	\$0.0000	10.00	0

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 14 Day of February, 2025 at 2:37:29 PM. 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 corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.

By TRACY CHENEY

Signature of Authorized Representative of the Corporation

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