RI SOS Filing Number: 202567033060 Date: 3/13/2025 4:15:00 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. 000112719

- 2. Name of Corporation MERCYMOUNT COUNTRY DAY SCHOOL
- 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

<u>611110</u>

4. Principal Office Address

No. and Street: 35 WRENTHAM ROAD

City or Town: CUMBERLAND State: RI Zip: 02864 Country: USA

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

TO MAINTAIN AND CONDUCT AN INSTITUTION FOR EDUCATION OF YOUTH IN COLLEGE, ELEMENTARY AND SECONDARY SCHOOLS AND SUCH OTHER DEPARTMENTS OF LEARNING AS MAY BE DETERMINED BY THE CORPORATION. EXCLUSIVELY FOR RELIGIOUS CHARITABLE SCIENTIFIC AND EDUCATIONAL PURPOSES WITHIN THE MEANING OF SECTION 501C3 OF THE INTERNAL REVENUE CODE OF 1986 AS AMENDED

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
TREASURER	MARK MAJKA	103 JEFFERSON ROAD FRANKLIN, MA 02038 USA
DIRECTOR	JASON MACARI	3100 DIAMOND HILL ROAD CUMBERLAND, RI 02864 USA
DIRECTOR	DOMENIC SCHIAVONE	400 BALD HILL ROAD, #134 WARWICK , RI 02886 USA
VICE PRESIDENT	MICHELLE BAKER	248 ABBOTT RUN VALLEY ROAD CUMBERLAND, RI 02864 USA
DIRECTOR	DR JANE MARINELLA	26 TIA PLACE FRANKLIN, MA 02038 USA
SECRETARY	MAUREEN MITCHELL, RSM	125 WRENTHAM ROAD CUMBERLAND, RI 02864 USA
DIRECTOR	GEORGE STANSFIELD	32 HILLSIDE ROAD CUMBERLAND , RI 02864 USA
DIRECTOR	SCOTT TERRIEN	10 GEDDES FARM LANE CUMBERLAND , RI 02864 USA
DIRECTOR	JULIE TEMLAK	6 REBECCA LANE CUMBERLAND, RI 02864 USA
PRESIDENT	RAYLEEN GIANNOTTI, RSM	9 LIPPITT AVENUE, LEFT CUMBERLAND, RI 02864 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

RAYLEEN GIANNOTTI, RSM 35 WRENTHAM ROAD CUMBERLAND, RI 02864

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 March, 2025 at 4:17:14 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 RAYLEEN GIANNOTTI

Signature of Authorized Person

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