



**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.** 001676030

**2. Name of Corporation** Legal Insurrection Foundation

**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: 18 MAPLE AVE #280

City or Town: BARRINGTON

State: RI

Zip: 02806

Country: USA

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

THE CORPORATION IS ESTABLISHED PRIMARILY TO FURTHER THE COMMON GOOD AND GENERAL WELFARE OF THE CITIZENS OF THE UNITED STATES OF AMERICA FOR ANY PURPOSE PERMITTED TO BE EXEMPT FROM TAXATION UNDER SECTION 501(C)(3) OF THE UNITED STATES INTERNAL REVENUE CODE, AS NOW IN OR HEREAFTER 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<br>First, Middle, Last, Suffix | Address<br>Address, City or Town, State, Zip Code, Country |
|-----------|------------------------------------------------|------------------------------------------------------------|
| PRESIDENT | WILLIAM A JACOBSON                             | 18 MAPLE AVE #280<br>BARRINGTON, RI 02806 USA              |
| TREASURER | MARTHA WALLICK                                 | 18 MAPLE AVE #280<br>BARRINGTON, RI 02806 USA              |
| DIRECTOR  | LISA DAFT                                      | 18 MAPLE AVE #280<br>BARRINGTON, RI 02806 USA              |
| SECRETARY | LISA DAFT                                      | 18 MAPLE AVE #280<br>BARRINGTON, RI 02806 USA              |
| DIRECTOR  | MARTHA WALLICK                                 | 18 MAPLE AVE #280<br>BARRINGTON, RI 02806 USA              |
| DIRECTOR  | WILLIAM A JACOBSON                             | 18 MAPLE AVE #280<br>BARRINGTON, RI 02806 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

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST  
PROVIDENCE , RI 02914

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

Signed this 14 Day of March, 2025 at 2:23:24 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 LORI LOW  
Signature of Authorized Person

Form No. 631  
Revised 09/07