RI SOS Filing Number: 202568740480 Date: 4/1/2025 4:08:00 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. <u>000033706</u>
- 2. Name of Corporation PROBLEM PREGNANCY OF PROVIDENCE, 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

<u>624190</u>

4. Principal Office Address

No. and Street: 400 ATWELLS AVENUE

City or Town: PROVIDENCE State: RI Zip: 02909 Country: USA

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

PREGNANCY TESTING AND COUNSELING.

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

DDECIDENT	DIANE COSTANTINO	
PRESIDENT	DIANE COSTANTINO	10 DENNELL DRIVE
		LINCOLN, RI 02865 USA
TREASURER	CHRISTINA BEYER	89 ALBERT AVE
		I I
		CRANSTON, RI 02905 USA
SECRETARY	REBECCA SCHULTE	26 STELLA DRIVE
		CUMBERLAND, RI 02864 USA
DIDECTOR	OLIOANI ODOGOLEV	
DIRECTOR	SUSAN CROSSLEY	238 RODMAN LANE
		NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	MATTHEW MARTINEZ	O INICTITUTE LANG
		9 INSTITUTE LANE
		SCITUATE, RI 02857 USA
VICE PRESIDENT	NANCY FORTE	50 S HILL DRIVE
		CRANSTON, RI 02920 USA
BUREATOR	NAMOV 50075	510 in 61 51 i, 1 in 52 52 5 55 i
DIRECTOR	NANCY FORTE	50 S HILL DRIVE
		CRANSTON, RI 02920 USA
DIRECTOR	MICHAEL BENSON	400 PHOK COVE PP
		139 DUCK COVE RD
		NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	CHRISTINA BEYER	89 ALBERT AVE
		CRANSTON, RI 02905 USA
		010 11011, 111 02300 00/1
DIRECTOR	REBECCA SCHULTE	26 STELLA DRIVE
		CUMBERLAND, RI 02864 USA
DIRECTOR	DIANE COSTANINO	10 DENUISU DONIE
		10 DENNELL DRIVE
		LINCOLN, RI 02865 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

EDMUND L. ALVES, JR, ESQ. 30 EXCHANGE TERRACE PROVIDENCE, RI 02903

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

Signed this 1 Day of April, 2025 at 4:11:43 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 REBECCA SCHULTE

Signature of Authorized Person

Form No. 631 Revised 09/07