



**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.** 000164270

**2. Name of Corporation** Sociologists for Women in Society

**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

813920

**4. Principal Office Address**

No. and Street: P.O. BOX 150

City or Town: SOUTH GLASTONBURY

State: CT

Zip: 06073

Country: USA

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

TO IMPROVE THE POSITION OF WOMEN WITHIN SOCIOLOGY AND TO HELP MEMBERS, BOTH WOMEN AND MENT, TO ADDRESS THE SCIENTIFICALLY DOCUMENTED NEEDS OF WOMEN

**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.**

| <b>Title</b>            | <b>Individual Name</b><br>First, Middle, Last, Suffix | <b>Address</b><br>Address, City or Town, State, Zip Code, Country |
|-------------------------|-------------------------------------------------------|-------------------------------------------------------------------|
| TREASURER               | TRACY ORE                                             | P.O. BOX 150<br>SOUTH GLASTONBURY, CT 06073 USA                   |
| TREASURER-ELECT         | CORINNE CASTRO                                        | P.O. BOX 150<br>SOUTH GLASTONBURY, CT 06073 USA                   |
| COUNCIL MEMBER-AT-LARGE | KRISTY KELLY                                          | P.O. BOX 150<br>SOUTH GLASTONBURY, CT 06073 USA                   |
| PARLIAMENTARIAN         | MANGALA SUBRAMANIAM                                   | P.O. BOX 150<br>SOUTH GLASTONBURY, CT 06073 USA                   |
| COUNCIL MEMBER-AT-LARGE | OPHRA LEYSER-WHALEN                                   | P.O. BOX 150<br>SOUTH GLASTONBURY, CT 06073 USA                   |
| PAST TREASURER          | RODICA LISNIC                                         | P.O. BOX 150<br>SOUTH GLASTONBURY, CT 06073 USA                   |
| VICE PRESIDENT          | VERONICA MONTES                                       | P.O. BOX 150<br>SOUTH GLASTONBURY, CT 06073 USA                   |
| COUNCIL MEMBER-AT-LARGE | CHAITANYA LAKKIMSETTI                                 | P.O. BOX 150<br>SOUTH GLASTONBURY, CT 06073 USA                   |
| DIRECTOR                | MARY VIRNOCHE                                         | P.O. BOX 150<br>SOUTH GLASTONBURY, CT 06073 USA                   |
| DIRECTOR                | BARRET KATUNA                                         | P.O. BOX 150<br>SOUTH GLASTONBURY, CT 06073 USA                   |
| DIRECTOR                | SYLVANNA FALCON                                       | P.O. BOX 150<br>SOUTH GLASTONBURY, CT 06073 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**

REGISTERED AGENTS INC 47 WOOD AVENUE, SUITE 2 BARRINGTON , RI 02806

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

**Signed this 9 Day of April, 2025 at 1:47:11 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 BARRET KATUNA

Signature of Authorized Person

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