RI SOS Filing Number: 202568774070 Date: 4/18/2025 8:09:00 AM



# 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>000486674</u>
- 2. Name of Corporation Rhode Island Parrot Rescue
- 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

813312

4. Principal Office Address

No. and Street: 173 WASHINGTON ST.

City or Town: WEST WARWICK State: RI Zip: 02893 Country: USA

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

## THE RESCUE AND REHABILITATION OF INJURED AND OR ABANDONED BIRDS

#### 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 |

| PRESIDENT      | CORRIE BUTLER     | 10 GRAND VIEW DR<br>WARWICK , RI 02886 USA                  |
|----------------|-------------------|---|
| TREASURER      | MICHELLE LAVOIE   | 208 WOOD AVE #3<br>WOONSOCKET, RI 02895 USA                 |
| SECRETARY      | DIANE CONYER      | 267 WIDOW SWEETS RD<br>EXETER, RI 02822 USA                 |
| VICE PRESIDENT | NATHANIEL MOLLICA | 907 SIXTH AVE.<br>REDWOOD CITY, CA 94063 USA                |
| DIRECTOR       | NICOLE WEBSTER    | 22 SPENCER AVE<br>EAST GREENWICH, RI 02818 USA              |
| DIRECTOR       | JOHN ROBINSON     | 76 VERONA ST<br>LYNN, MA 01904 USA                          |
| DIRECTOR       | SHANNON SOMYK     | 401 SEASIDE DR<br>JAMESTOWN, RI 02835 USA                   |
| DIRECTOR       | DR ANNE BOURKE    | NORTHEAST BIRD CLINIC , PO BOX 301<br>ASHFORD, CT 06278 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

MICHELLE LAVOIE 173 WASHINGTON ST FLOOR 3 WEST WARWICK, RI 02893

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

**Signed this 18 Day of April, 2025 at 8:11:45 AM 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 MICHELLE LAVOIE

Signature of Authorized Person

Form No. 631 Revised 09/07

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