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## State of Rhode Island

## **Department of State - Business Services Division**

Annual Report for the year: 2025

**Non-Profit Corporation** 

- → Filing period. February 1 May 1

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→ Filing Fee. \$20.00 → Penalty Additional \$25.00 fee if the second s	form is not filed by	May 31.	0.00				
1. Entity ID Number 001715684	2. Exact name of the Corporation The Beacon Foundation						
State of Incorporation     Rhode Island	5. Brief description of the character of business conducted in Rhode Island  Non-Profit organization, organized and operated exclusively for charitable,						
4. NAICS Code 813211	educational and scientific purposes in accordance with Section 501(c)(3)						
6. Principal Office Address One Beacon Centre			City Warwick	State RI	Zip 02886		
7. List ALL officers (names and addresses)  Check the box to indicate an attachment							
President Name Amy C. Vitale			Vice-President Name Rajani Mahadevan				
Street Address One Beacon Centre			Street Address One Beacon Centre				
<sup>City</sup> Warwick	State RI	<sup>Zıp</sup> 02886	<sup>City</sup> Warwick	State RI	<sup>Z<sub>ip</sub></sup> 02886		
Secretary Name Rajani Mahadevan			Treasurer Name Gregg C. Tumeinski				
Street Address One Beacon Centre			Street Address One Beacon Centre				
<sup>City</sup> Warwick	State RI	<sup>Zip</sup> 02886	<sup>City</sup> Warwick	State RI	<sup>Zip</sup> 02886		
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors.  Check the box to indicate an attachment 🗸							
Director Name Brian J. Spero			Director Name Amy C. Vitale				
Street Address One Beacon Centre			Street Address One Beacon Centre				
<sup>City</sup> Warwick	State RI	<sup>Zip</sup> 02886	<sup>City</sup> Warwick	State RI	Zip U2000		
Director Name Rajani Mahadevan			Director Name Gregg C. Tumeinski				
Street Address One Beacon Centre			Street Address One Beacon Centre				
<sup>City</sup> Warwick	State RI	<sup>Zip</sup> 02886	<sup>City</sup> Warwick	State RI	<sup>Zip</sup> 02886		
9. The Registered Agent information	n of record with th	e RI Department (	of State is accurate. Changes require	filing Form 641.			
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.							
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee							
Name of Officer/Authorized Representative Date							
Amy C. Vitale, President & CEO April 22, 202					025		
Signatury of Officer/Authorized Rep	resentative		eu ED				

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

FORM 631- Revised: 12/2023

## The Beacon Foundation - Corporation ID No. 001715684 2025 Annual Report - Attachment

## **Additional Directors**

Raymond C. Coia Michelle N. Pelletier Richard Lento Shannon L. Broadbent One Beacon Centre, Warwick, RI 02886 One Beacon Centre, Warwick, RI 02886 One Beacon Centre, Warwick, RI 02886 One Beacon Centre, Warwick, RI 02886