



**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.** 000027882

**2. Name of Corporation** BROWN PLAY SCHOOL

**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  
624410

**4. Principal Office Address**

No. and Street: 4 NEWMAN AVENUE

City or Town: RUMFORD

State: RI

Zip: 02916

Country: USA

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

PRESCHOOL FOR 3 AND 4 YEAR OLDS

**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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
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PRESIDENT	MATTHEW WALL	21 PAVILLION AVE RUMFORD, RI 02916 USA
TREASURER	JUSTIN MAISTROW	6 ACRE AVE. BARRINGTON, RI 02806 USA
SECRETARY	ELIZABETH O'ROURKE	22 CATLIN AVE RUMFORD, RI 02916 USA
VICE PRESIDENT	MICHAEL BURNS	6 GERRY DR. SEEKONK, MA 02771 USA
DIRECTOR	RYAN LAUER	934 BULLOCKS AVE RIVERSIDE, RI 02916 USA
DIRECTOR	MEGAN HEINZE	107 MESSER ST. PROVIDENCE, RI 02909 USA
DIRECTOR	CLAUDINE TAYLOR	28 DALTON ST RUMFORD, RI 02916 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**

CLAUDINE TAYLOR 4 NEWMAN AVENUE RUMFORD , RI 02916

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

**Signed this 12 Day of May, 2025 at 9:39:15 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 ELIZABETH O'ROURKE  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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