

State of Rhode Island

Department of State - Business Services Division

STARP

Annuai	Report	tor 1	the	year
Non-Pro	nfit Cor	nora	tio	n

→ Filing period: February 1 - May 1

→ Filing Fee: \$20.00

→ Filing Fee: \$20.00 → Penalty: Additional \$25.00 fee if form is not filed by May 31.					<u> </u>	
1. Entity ID Number 1045121	2. Exact name	of the Corporation			7 <u>6</u>	
04-3461434	Community Resources for Justice, Inc.					
3. State of Incorporation	5. Brief description of the character of business conducted in Rhode Island					
MA	Advancing policy and delivering individualized services that promote					
4. NAICS Code	safety, justice & inclusion.					
611710					_	
6. Principal Office Address			City	State	Zip	
355 Boylston Street			Boston	MA_	02116	
7. List ALL officers (names and addresses)			Check the box to indicate an attachmen			
President Name Sandra Best Bailey			Vice-President Name Brian Corr			
Street Address 355 Boylston Street			Street Address 355 Boylston Street			
City Boston	State MA	^{Zip} 02116	^{City} Boston	State MA	Zip 02116	
Secretary Name Neni Odiaga			Treasurer Name Tim Cabot			
Street Address 355 Boylston Street			Street Address 355 Boylston Street			
City Boston	State MA	^{Zip} 02116	City Boston	State MA	Zip 02116	
8. List ALL directors (names and ad	ddresses). Rl Co	orporations MUST I	ist at least THREE directors.	Check the box to indicate a	n attachment	
Director Name Mohamed Abdallah			Director Name Bernadette De Ri			
Street Address 355 Boylston Street			Street Address 355 Boylston Street			
City Boston	State MA	^{Zip} 02116	City Boston	State MA	Zip UZ 1 1U	
Director Name Ashley Dortch			Director Name Kathleen Kadziolka			
Street Address 355 Boylston Street			Street Address 355 Boylston Street			
City Boston	State MA	Z _{IP} 02116	City Boston	State MA	Zip 02116	
9. The Registered Agent information	on of record with	the RI Department	of State is accurate. Change	es require filing Form 641		
Under penalty of perjury, I decla statements, and that all stateme				accompanying schedu	iles and	
This report must be signed by either the Pre-				Representative, Receiver or Trus	il oo .	
Name of Officer/Authorized Repres	Date					
Peter Gerondeau	E/0/2025	5/9/2025				

MAIL TO: B18855A4ACF8448

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

Community Resources for Justice, Inc.

-BIN: 94-9461434

Attachment to RI Annual Report
June 30, 2024

Question 8 Continued:
Steven Kryger-Even
James G. Marchetti
Honorable James F. McHugh
Gerry Morrissey
George O'Toole
Peter Patch
Peter Tamm
Sara Pagani (until 3/2024)

All of the above can be reached at: 355 Boylston Street Boston, MA 02116