

**State of Rhode Island
Office of the Secretary of State**

No Fee

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040**Domestic Non-Profit
Annual Report - Amended**

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-1.2-1501(e), 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.

This form is only to be used to amend the current annual report on file with this office.**ANNUAL REPORT YEAR:** 2025**1. Corporate ID No.** 001704597**2. Name of Corporation** Central Falls Children's Foundation**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

624110**3. State of Incorporation**State: RI**4. Corporate Address in Rhode Island**No. and Street: 577 BROAD STREET
FLOOR 1City or Town: CENTRAL FALLS State: RI Zip: 02863 Country: USA**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**SUPPORT THE HEALTH AND WELLBEING OF UNDERINSURED CHILDREN OF
CENTRAL FALLS**7. Names and Addresses of the Officers and Directors:****All officers and directors must be listed. If officers and/or directors have been elected, the title**

Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3).
R.I.G.L.
7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	STEPHANIE GONZALEZ	35 DEBORAH STREET PROVIDENCE, RI 02909 USA
VICE PRESIDENT	JONATHON ACOSTA	100 ILLINOIS STREET CENTRAL FALLS, RI 02863 USA
EXECUTIVE DIRECTOR	DIOSCARIS RAFAEL GARCIA	26 CEDARBROOK RD PAWTUCKET, RI 02861 USA
SECRETARY	JESSICA VEGA	54 PARKER ST CENTRAL FALLS, RI 02863 USA
DIRECTOR	BEATA NELKEN MD	48 GLEN AVENUE CRANSTON, RI 02905 USA
DIRECTOR	ERNESTO N. REGUS	48 GLEN AVE CRANSTON, RI 06515 USA
DIRECTOR	MIRANDA NELKEN	82 BILLINGS AVE KEENE, NH 03431 USA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

BEATA F. NELKEN 577 BROAD STREET, FLOOR 1 CENTRAL FALLS , RI 02863

Signed this 13 Day of June, 2025 at 5:48:06 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 BEATA NELKEN
Signature of Authorized Person

Form No. 631
Revised 09/07



State of Rhode Island

Department of State | Office of the Secretary of State

Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this

office on this day:

June 13, 2025 05:47 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is fluid and cursive, with the first letters of each word being capitalized and prominent.

Gregg M. Amore
Secretary of State

