



**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.** 001339730

**2. Name of Corporation** Total Teacher Project

**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

611110

**4. Principal Office Address**

No. and Street: 17 BEECH TREE RD

City or Town: RUMFORD

State: RI

Zip: 02916

Country: USA

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

LEADERSHIP AND PERSONAL DEVELOPMENT FOR TEACHERS.

**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

PRESIDENT	ELLYN METCALF	17 BEECH TREE RD RUMFORD, RI 02916 USA
SECRETARY	CATHERINE METCALF	1000 SOUTH BROAD ST PHILADELPHIA, PA 19146 USA
DIRECTOR	KARA SALIT	39 LETENDRE DR SEEKONK, MA 02771 USA
DIRECTOR	CATHERINE METCALF	1000 SOUTH BROAD ST PHILADELPHIA, PA 19146 USA
DIRECTOR	ELLYN METCALF	17 BEECH TREE RD 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**

ELLYN METCALF 17 BEECH TREE ROAD 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 19 Day of September, 2025 at 9:52:21 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 ELLYN METCALF  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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