



**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 2024: 2024

1. Corporate ID No. 000028403

2. Name of Corporation The Fogarty Center

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

624120

4. Principal Office Address

No. and Street: 310 MAPLE AVENUE, SUITE 102

City or Town: BARRINGTON

State: RI Zip: 02806 Country: USA

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

SOCIAL SERVICES TO PEOPLE WITH DEVELOPMENTAL DISABILITIES

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	JAMES CAMPAGNA	15 LEILA JEAN DR. BRISTOL, RI 02809 USA
TREASURER	ANTHONY DENNIS	6 CHARITY DR. WARREN, RI 02885 USA
SECRETARY	JOHN B. AFFLECK	18 MEMORIAL AVE. LINCOLN, RI 02865 USA
CEO	DAVID C. REISS	281 TABLE ROCK RD. WAKEFIELD, RI 02879 UNI
VICE PRESIDENT	LISA RAFFERTY	PO BOX 263 JAMESTOWN, RI 02835 USA
DIRECTOR	MOLLY SMITH	245 MIANTONOMO DR WARWICK, RI 02888 USA
DIRECTOR	JOSEPH LAMAGNA	23 AURORA DR. CUMBERLAND, RI 02864 USA
DIRECTOR	KATE NELSON	3628 PAWTUCKET AVE. E. PROVIDENCE, RI 02915 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

DAVID C. REISS 310 MAPLE AVENUE, SUITE 102 BARRINGTON , RI 02806

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

Signed this 2 Day of February, 2024 at 11:04:32 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 DAVID REISS
Signature of Authorized Person

Form No. 631
Revised 09/07

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