

Corporation shall not be less than 3.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	COREEN LEE ST JEAN	672 TOWN FARM RD COVENTRY, RI 02816 USA
SECRETARY	JOSEPH ALLEN	54 PROVIDENCE ST WEST WARWICK, RI 02893 US
VICE PRESIDENT	MINDY CHRISTINA	26 LODI COURT WARWICK, RI 02886 US
DIRECTOR	COREEN ST JEAN	672 TOWN FARM RD COVENTRY, RI 02816 USA
DIRECTOR	MINDY CHRISTINA	26 LODI COURT WARWICK, RI 02886 US
DIRECTOR	HEIDI AUDET	11 SHERWOOD AVE COVENTRY , RI 02816 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**

COREEN ST JEAN 10 BROOKSIDE AVENUE WEST WARWICK , RI 02893

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

The Department of State tracks the number of new business filings on a quarterly and annual basis. We are seeking more information from non-profit corporations and hope the following voluntary questions will help us better present useful trends and information on the health of our economy.

1. How many full time employees does the non-profit have:

- 0
 1-5
 6-50
 51-200
 201-500
 Over 500

2. How many volunteers does the non-profit have:

- 0-5
 6-25
 26-50
 51-100
 Over 100

3. What was the non-profit's operating budget for the past year:

- \$0 - \$50,000
 \$51,000 - \$250,000
 \$251,000 - \$500,000
 \$501,000 - \$1,000,000
 Over \$1,000,000

4. (Select all that apply) - Identify the funding sources that contributed to the non-profit's operating budget for the past year:

- Federal grants
 State grants
 Donations
 Fee-for-service
 Fundraising

Filer's Contact Information

(Enter a contact name, mailing address and email.)