STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
*Office of the Secretary of State*
***Matthew A. Brown,** Secretary of State*

*Corporations Division*
*100 North Main Street*
*Providence, RI 02903-1335*
*401.222.3040*

# NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

***Filing Period: June 1 - June 30 • Filing Fee: $20.00***

***(FORM MUST BE TYPED OR PRINTED IN BLACK)***

| 1. Corporate ID No. | 2. Name of Corporation | | |
|---|---|---|---|
| 103720 | Mount Hope Learning Center | | |
| 3. State of Incorporation | 4. Corporate address in Rhode Island - Street Address | City | Zip |
| RHODE ISLAND | 140 Cypress Street | Providence | 02906 |
| 5. **Foreign corporation.** Enter principal office address | City | State | Zip |
| | | | |

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island

TO PROVIDE TUTORING FOR CHILDREN AND ADULTS, TO PROVIDE BASIC COMPUTER CLASSES IN ENGLISH AND SPANISH, TO PROVIDE SKILL-BASED PROGRAMS WITH VOLUNTEERS.

**7. NAMES AND ADDRESSES OF THE OFFICERS:** ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

| President Name | Street Address | City | State | Zip |
|---|---|---|---|---|
| Lenny Long | 100 Jenkins St | Providence | RI | 02906 |

| Vice President Name | Street Address | City | State | Zip |
|---|---|---|---|---|
| Stacy Couto | 97 Jenkins St | Providence | RI | 02906 |

| Secretary Name | Street Address | City | State | Zip |
|---|---|---|---|---|
| Ruth Breindel | 617 Hope St | Providence | RI | 02906 |

| Treasurer Name | Street Address | City | State | Zip |
|---|---|---|---|---|
| George Pereira | 20 Schofield St | Providence | RI | 02906 |

**8. NAMES AND ADDRESSES OF THE DIRECTORS:** ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

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

| Director Name | Street Address | City | State | Zip |
|---|---|---|---|---|
| Kelly Wishart | 91 Imera St | Providence | RI | 02909 |

| Director Name | Street Address | City | State | Zip |
|---|---|---|---|---|
| Ruth Breindel | 617 Hope St | Providence | RI | 02906 |

| Director Name | Street Address | City | State | Zip |
|---|---|---|---|---|
| Stacy Couto | 97 Jenkins St | Providence | RI | 02906 |

| Director Name | Street Address | City | State | Zip |
|---|---|---|---|---|
| George Pereira | 20 Schofield St | Providence | RI | 02906 |

**9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

| Agent Name | Address | | |
|---|---|---|---|
| LENNY LONG | | | |
| Address | City | Zip | |
| 140 CYPRESS STREET | PROVIDENCE | 02906 | |

This report must be **signed in ink** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

[redacted] [redacted]

* 1 0 3 7 2 0 *

*File Date* 8/3/04

*Check No.* 1920

*By:* DA

FOR SECRETARY OF STATE USE ONLY

[redacted]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Ruth Breindel — *Signature of Officer* — 6/16/04 *Date*

Ruth Breindel — *Print or Type Name of Officer*

Secretary — *Title of Officer*

Form 631 Rev. 04/04