



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov/business

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **2013**

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 62605		2. Exact name of the Corporation HOPE Helping Other People Emergencies			
3. State of Incorporation RI		4. Brief description of the character of business conducted in Rhode Island Low income housing, Food, Shelter, Furniture and Clothing			
5. Principal office address 138 Superior St.		City Providence,	State RI	Zip 02909	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name JOE Stewart		Vice-President Name Kathleen Davis Stewart			
Street Address 2 Mattie st.		Street Address 14 Spicer st.			
City Providence	State RI	Zip 02909	City Providence	State RI	Zip 02905
Secretary Name Durrell Stewart		Treasurer Name Val Tate			
Street Address 2 Mattie st.		Street Address 85 Eliza st			
City Providence	State RI	Zip 02909	City Providence	State RI	Zip 02909
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Gary Blackwell		Director Name William Batman			
Street Address 136 Superior st.		Street Address 44 Superior st			
City Providence	State RI	Zip 02909	City Providence	State RI	Zip 02907
Director Name Brianna Davis		Director Name			
Street Address 14 Spicer st		Street Address			
City Providence	State RI	Zip 02905	City	State	Zip
8. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

RECEIVED
 SECRETARY OF STATE
 CORPORATIONS DIV
 2013 JUN 18 AM 11:40

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

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

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.

FILED

JUN 18 2013

Joe Stewart
 Signature of Officer

06/17/2013

Date

Joe Stewart

Print or Type Name of Officer

President

Title of Officer

By: *19-199610*

AA