



State of Rhode Island and Providence Plantations
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: June 1 - June 30

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: 2014

1. Corporate ID No. 000047671

2. Name of Corporation THE MOUNT HOPE NEIGHBORHOOD LAND TRUST

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 185 CAMP STREET

City or Town: PROVIDENCE

State: RI

Zip: 02906

Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO PROVIDE FOR THE PRESERVATION & DEVELOPMENT OF THE MOUNT HOPE NEIGHBORHOOD.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

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

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	DOROTHY OLA	24 ROYAL STREET PROVIDENCE, RI 02906- USA
TREASURER	ROCHELLE LEE	172 ONTARIO STREET PROVIDENCE, RI 02907 USA

DIRECTOR	DANA CARVALHO	C/O 190 CAMP STREET PROVIDENCE, RI 02906 USA
DIRECTOR	CAROL MONTERIO	18 DUNCAN STREET PROVIDENCE, RI 02906 USA
DIRECTOR	EUGENE MONTERIO	C/O 185 CAMP STREET PROVIDENCE, RI 02906 USA
SECRETARY	LISA NIEBELS	21 GROSVENOR STREET PROVIDENCE, RI 02908 USA

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

LISA NIEBELS 21 GROSVENOR STREET PROVIDENCE , RI 02908

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

Signed this 31 Day of July, 2014 at 5:34:21 PM 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 DOROTHY OLA
Signature of Authorized Person

Form No. 631
Revised 09/07