



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:** 2015

**1. Corporate ID No.** 000134589

**2. Name of Corporation** Hope Renewed Realty Corporation

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 224 DEXTER STREET

City or Town: PROVIDENCE

State: RI

Zip: 02907

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**

PURCHASE AND LEASING OF REAL ESTATE

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	ANGELA ANKOMA	224 DEXTER ST PROVIDENCE, RI 02907 USA
TREASURER	CLAUDIA MCCONAGHY	36 JUNIPER DR. WEST WARWICK, RI 02893 USA
SECRETARY	EDGAR CARRERE	224 DEXTER ST

		PROVIDENCE, RI 02907 USA
DIRECTOR	FELICIA AZAKPO-TANNENBAUM	224 DEXTER STREET PROVIDENCE, RI 02907 USA
DIRECTOR	VICTOR ROSS	224 DEXTER STREET PROVIDENCE, RI 02907 USA
DIRECTOR	CECILIA MEDEIROS	224 DEXTER STREET PROVIDENCE, RI 02907 USA
DIRECTOR	CLAUDIA MCCONAGHY	36 JUNIPER DRIVE WEST WARWICK, RI 02907 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**

CAROL DAVIS 224 DEXTER STREET PROVIDENCE , RI 02907

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

**Signed this 24 Day of June, 2015 at 12:40:59 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 SHARON CONARD-WELLS  
Signature of Authorized Person

Form No. 631  
Revised 09/07