



**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

## NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **2015**

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. <b>62605</b>		2. Exact name of the Corporation <b>HOPE Helping Other People Emergencies</b>			
3. State of Incorporation <b>Rhode Island</b>		4. Brief description of the character of business conducted in Rhode Island <b>Shelter, Housing ,Food , Clothing and furniture</b>			
5. Principal office address <b>134 Glenbridge ave</b>		City <b>Providence</b>		State <b>RI</b>	Zip <b>02909</b>
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <b>Joe Stewart</b>		Vice-President Name <b>Kathleen Davis</b>			
Street Address <b>134 Glenbridge ave</b>		Street Address <b>45 Middleton st</b>			
City <b>Providence</b>	State <b>RI.</b>	Zip <b>02909</b>	City <b>Providence</b>	State <b>RI.</b>	Zip <b>02909</b>
Secretary Name <b>Brianna Davis</b>		Treasurer Name <b>Durrell Stewart</b>			
Street Address <b>14 Spicer st</b>		Street Address <b>Po. box 29574</b>			
City <b>Providence</b>	State <b>RI.</b>	Zip <b>02905</b>	City <b>Providence</b>	State <b>RI.</b>	Zip <b>02909</b>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS <b>MUST</b> LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name <b>William Batman</b>		Director Name <b>Gary Blackwell</b>			
Street Address <b>90 Superior st</b>		Street Address <b>138 Superior st</b>			
City <b>Providence</b>	State <b>RI.</b>	Zip <b>02907</b>	City <b>Providence</b>	State <b>RI.</b>	Zip <b>02909</b>
Director Name <b>Dee Stewart</b>		Director Name			
Street Address <b>2 Mattie st</b>		Street Address			
City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</b>	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.					

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

**FILED**

**JUL 17 2015**

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.

File Date \_\_\_\_\_

Check No \_\_\_\_\_

By: \_\_\_\_\_

BY

*Joe Stewart*

*D. 24*

Signature of Officer or Authorized Representative

**07/17/2015**

Date

**FOR SECRETARY OF STATE USE ONLY**

**Joe Stewart President**

Print or Type Name of Officer or Authorized Representative