



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

**Annual Report for the year: 2017**

**Non-Profit Corporation**

- Filing period: June 1 - June 30
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by July 30.

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 R.I. DEPT. OF STATE  
 BUS SVCS DIV  
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1. Entity ID Number <b>787705</b>		2. Exact name of the Corporation <b>Sunset Cove Foundation</b>			
3. State of Incorporation <b>RHODE ISLAND</b>		5. Brief description of the character of business conducted in Rhode Island <b>PROVIDING SUPPORT TO (1) ORGANIZATIONS ENGAGED IN INDIVIDUAL EMPOWERMENT THROUGH MENTORSHIP, EDUCATION, AND FINANCIAL LITERACY; AND (2) ORGANIZATIONS AND PROGRAMS WHICH SUSTAIN THE CULTURAL HERITAGE AND NATURAL RESOURCES OF RI AND WHICH QUALIFY AS EXEMPT ORGANIZATIONS UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE.</b>			
4. NAICS Code <b>813910 - Business Associati</b>					
6. Principal Office Address <b>61 ASYLUM ROAD</b>			City <b>WARREN</b>	State <b>RI</b>	Zip <b>02885</b>
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>HEATHER M. HOWER</b>			Vice-President Name <b>NONE</b>		
Street Address <b>61 ASYLUM ROAD</b>			Street Address		
City <b>WARREN</b>	State <b>RI</b>	Zip <b>02885</b>	City	State	Zip
Secretary Name <b>LINDA HOWER BATES</b>			Treasurer Name <b>LEE M. HOWER</b>		
Street Address <b>53 ASYLUM ROAD</b>			Street Address <b>61 ASYLUM ROAD</b>		
City <b>WARREN</b>	State <b>RI</b>	Zip <b>02885</b>	City <b>WARREN</b>	State <b>RI</b>	Zip <b>02885</b>
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>HEATHER M. HOWER</b>			Director Name <b>LINDA HOWER BATES</b>		
Street Address <b>61 ASYLUM ROAD</b>			Street Address <b>53 ASYLUM ROAD</b>		
City <b>WARREN</b>	State <b>RI</b>	Zip <b>02885</b>	City <b>WARREN</b>	State <b>RI</b>	Zip <b>02885</b>
Director Name <b>LEE M. HOWER</b>			Director Name		
Street Address <b>61 ASYLUM ROAD</b>			Street Address		
City <b>WARREN</b>	State <b>RI</b>	Zip <b>02885</b>	City	State	Zip
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>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.</b>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative <b>LEE M. HOWER</b>				Date <b>6/9/17</b>	
Signature of Officer/Authorized Representative 					

**FILED**

JUN 21 2017

BY qnb306547