



**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:** 2017

**1. Corporate ID No.** 000026423

**2. Name of Corporation** AMOS HOUSE

**3. State of Incorporation**

State: RI

**ARTICLE III**

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

6

813319

**4. Corporate Address in Rhode Island**

No. and Street: 460 PINE 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**

EMERGENCY FOOD AND SHELTER SERVICE

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	EILEEN HAYES	415 FRIENDSHIP PROVIDENCE, RI 02907 USA
CHAIR	JIM HAGERTY	23 BROAD STREET PROVIDENCE, RI 02903 USA
VICE CHAIR	JOHN FARBER	105 FREEMAN PARKWAY PROVIDENCE, RI 02906 USA
DIRECTOR	RICHARD DUNN	ONE TURKS HEAD PLACE, 16TH FLOOR PROVIDENCE, RI 02903 USA
DIRECTOR	GEORGE KINNEAR	100 WESTMINSTER STREET PROVIDENCE, RI 02860 USA
DIRECTOR	PAUL CONFORTI	375 COMMERCE PARK ROAD NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	LYNNE KELLY	180 MIDDLE STREET PAWTUCKET, RI 02860 USA
DIRECTOR	DENNIS LEAMY	10 AMICA CENTER BLVD. LINCOLN, RI 02865 USA
DIRECTOR	FLA LEWIS	72 SOUTH MAIN STREET PROVIDENCE, RI 02906 USA
DIRECTOR	ROBERT DUFFY	1800 FINANCIAL PLAZA PROVIDENCE, RI 02903 USA
DIRECTOR	PATRICK QUINN	56 EXCHANGE TERRACE PROVIDENCE, RI 02903 USA
DIRECTOR	CHRIS VEDRO	180 WESTMINSTER STREET PROVIDENCE, RI 02903 USA
DIRECTOR	BINTOU CHATTERTON	99 JAY STREET RUMFORD, RI 02916 USA
DIRECTOR	RON SIMONEAU	3 DAVOL SQUARE, SUITE A275 PROVIDENCE, RI 02903 USA
DIRECTOR	JEROME HINES	460 PINE STREET PROVIDENCE, 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**

EILEEN HAYES 415 FRIENDSHIP 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 21 Day of July, 2017 at 3:21:23 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 EILEEN HAYES  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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