RI SOS Filing Number: 201748548650 Date: 8/17/2017 10:48:00 AM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: **Non-Profit Corporation**

20202

R.I. DEPT. OF STATE

2017 AUG 17 AM 10: 47

Filing period: June 1 - June 30

Filing Fee: \$20.00

Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number	2. Exact name of the Corporation					
96031	Save the N	Save the Neighborhoods Inc				
3. State of Incorporation	5. Brief desc	5. Brief description of the character of business conducted in Rhode Island				
Rhode Island	1	Non Profit Housing, education and various charitable causes and businesses including education				
4. NAICS Code	and relief fo	and relief for the homeless and the poor.				
624229 - Other Community Ho	i					
6. Principal Office Address			City	State	Zip	
John H. Ruginski Suites, 127 Dorrance Street, 5th Floor			Providence	RI	02903	
7. List ALL officers (names and a	ddresses)			Check the box to i	ndicate an attachment	
President Name Robert Cooper			Vice-President Name			
Street Address 725 Branch Avenue, #104			Street Address			
City Providence	State RI	Zip 02904	City	State	Zip	
Secretary Name			Treasurer Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
8. List ALL directors (names and a	addresses). Ri C	Corporations MUST	list at least THREE directors.	Check the how	to indicate an attachment	
Director Name Thalia Cores			Director Name Jaime Cores			
Street Address 37 Sibley Street			Street Address 211 Pavilion Street			
City Providence	State RI	^{Zip} 02907	City Providence	State R	Zip 02905	
Director Name Andrew Cooper	·····		Director Name Jamie Lee Cores			
Street Address 27 Fenner Street			Street Address 37 Sibley Street			
City Fall River	State MA	Zip 02724	City Providence	State R	RI Zip 02907	
9. Registered Agent in Rhode Isla	nd. This information	on is currently of reco	rd in the Department of State. Ch	anges require filing F	Form 641.	
Under penalty of perjury, I decla statements, and that all stateme				accompanying s	schedules and	
This report must be signed by either the Pre	sident, Vice-Preside	nt, Secretary, Assistant S	Secretary, Treasurer, duly Authorized R	Representative, Receive	er or Trustee.	
Name of Officer/Authorized Representative Robert Cooper				Date 8/17/20/7		
Signature of Officer/Authorized Re			FIIF	in –		

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov AUG 17 2017 10:48

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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Entity ID: 96031

Save the Neighborhoods Inc

2017 Filing - Addendum to Board of Directors

Robert Cooper 725 Branch Avenue #104 Providence, RI 02904

LUCY Throck Monton

142 Rounds Ave

Pru PI 02907