RI SOS Filing Number: 201864740510 Date: 5/11/2018 5:52:00 PM



# State of Rhode Island and Providence Plantations Office of the Secretary of State

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: 2018

- **1. Corporate ID No.** 000116492
- 2. Name of Corporation Rhode Island Vegan Awareness
- 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

Fee: \$20.00

813319

### 4. Corporate Address in Rhode Island

No. and Street: RIVA

P.O. BOX 6786

City or Town: WARWICK State: RI Zip: 02886 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

TO PROMOTE THE VALUES OF VEGANISM, INCLUDING BUT NOT LIMITED TO COMPASSION FOR OTHER SPECIES, ECOLOGICAL HARMONY, HUMAN HEALTH AND SUSTAINABILITY.EXCLUSIVELY FOR THE PURPOSES EDUCATIONAL CHRITABLE PREVETION OF CRUELTY TO ANIMALS SPECIFIED IN SECTION 501C3 OF THE INTERNAL REVENUE CODE

#### 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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	LAURA A BARLOW	1190 PIPPIN ORCHARD RD
		CRANSTON, RI 02921 USA
TREASURER	KENNY NARDOZZA	101 MAPLEVILLE RD
		GREENVILLE, RI 02828 USA
SECRETARY	ZAK THEIS	66 WEST ALLENTON RD
		NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	LAURA A BARLOW	1190 PIPPIN ORCHARD RD
		CRANSTON, RI 02921 USA
VICE PRESIDENT	HEDI CARLA	104 GANSETT AVE.
		CRANSTON, RI 02910 USA
DIRECTOR	HEIDI CARLA	104 GANSETT AVENUE
		CRANSTON, RI 02910 USA
DIRECTOR	LENORE MONTANARO	252 HAVERHILL AVE
		NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	ZAK THEIS	66 WEST ALLENTON RD
		NORTH KINGSTWN , RI 02852 USA
DIRECTOR	CINDY LEMOI	9 PARK LANE UNIT 194
		COVENTRY, RI 02816 USA
DIRECTOR	MELODI LANDI	PO BOX 1197
		COVENTRY, RI 02816 USA
DIRECTOR	KENNY NARDOZZA	101 MAPLEVILLE RD
		GREENVILLE, RI 02828 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

LAURA BARLOW 1190 PIPPIN ORCHARD ROAD CRANSTON, RI 02921

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

Signed this 11 Day of May, 2018 at 5:54:48 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 LAURA BARLOW

Signature of Authorized Person

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