



**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:** 2019

**1. Corporate ID No.** 000529664

**2. Name of Corporation** Gotta Have Sole Foundation, Inc.

**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

**4. Corporate Address in Rhode Island**

No. and Street: 39 EAST BEL AIR ROAD  
City or Town: CRANSTON State: RI Zip: 02920 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**

DEDICATED TO PROVIDING NEW FOOTWEAR TO UNDERPRIVILEGED CHILDREN

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	NICHOLAS LOWINGER	39 EAST BEL AIR ROAD CRANSTON, RI 02920 USA
TREASURER	DANIEL LOWINGER MR.	39 EAST BEL AIR ROAD CRANSTON, RI 02920 USA
VICE PRESIDENT	LORI LOWINGER MRS.	39 EAST BEL AIR ROAD CRANSTON, RI 02920 USA
DIRECTOR	MINDY MILLER NOVACK MRS.	220 E. 67TH STREET, APT 3D NYC, NY 10065 USA
DIRECTOR	LAURI LEE	GOVERNOR STREET PROVIDENCE, RI 02906 USA
DIRECTOR	IRWIN SHULKIN	425 MESHANTICUT VALLEY PARKWAY CRANSTON, RI 02920 USA
DIRECTOR	TERENCE LEE	GOVERNOR STREET PROVIDENCE, RI 02906 USA
DIRECTOR	BETH SCHWARTZ	33 EVERETT ROAD CRANSTON, RI 02920 USA
DIRECTOR	KAREN KAISER	126 SMOKE RISE DRIVE WARREN, NJ 007059 US

**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**

LORI LOWINGER 39 EAST BEL AIR ROAD CRANSTON , RI 02920

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

**Signed this 13 Day of May, 2019 at 7:29:40 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 LORI LOWINGER  
Signature of Authorized Person

Form No. 631  
Revised 09/07