



**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.** 000034779

**2. Name of Corporation** Better Lives Rhode Island

**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: 15 HAYES STREET

City or Town: PROVIDENCE

State: RI

Zip: 02908

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**

AN ASSOCIATION OF INDIVIDUALS AND FAITH ORAGANIZATIONS,WHO THROUGH SHARED MINISTRY AND MISSION, PROVIDE RESOURCES AND PROGRAMS TO MEET BASIC HUMAN NEEDS SUCH AS SHELTER, FOOD, CLOTHING, HEALTH CARE AND SUPPORT

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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

| <b>Title</b>   | <b>Individual Name</b><br>First, Middle, Last, Suffix | <b>Address</b><br>Address, City or Town, State, Zip Code, Country |
|----------------|---|---|
| PRESIDENT      | MATTHEW CASEY ESQ                                     | 471 W. SHORE RD<br>WARWICK, RI 02889 KEN                          |
| TREASURER      | PAUL CAPUANO  | ONE PARDONS WOOD LANE<br>EAST GREENWICH, RI 02818 USA             |
| SECRETARY      | GLORIA SHAFEE MOGHADAM                                | 35 MAPLECREST DR<br>GREENVILLE, RI 02828 USA                      |
| VICE PRESIDENT | MARITZA PEREZ   | 41 CENTRAL ST<br>CRANSTON, RI 02905 USA                           |
| DIRECTOR       | ELENA ALMONTE   | 33 PRUDENCE AVE<br>PROVIDENCE, RI 02909 USA                       |
| DIRECTOR       | SHAMUS DURAC ESQ                                      | EVERGREEN ST.<br>PROVIDENCE, RI 02906 USA                         |
| DIRECTOR       | JAY FRAILS  | 47 TAYLOR DR.<br>RUMFORD, RI 02916 USA                            |
| DIRECTOR       | ELIZABETH MESSIER CPA                                 | 33 SETH DR.<br>ATTLEBORO, MA 02703 USA                            |
| DIRECTOR       | MARCUS MITCHELL                                       | 135 ABBOTT ST<br>PROVIDENCE, RI 02906 USA                         |
| DIRECTOR       | RICHARD MORSE   | 50 GLENSIDE DR.<br>BLACKSTONE, MA 01504 USA                       |
| DIRECTOR       | WILMAR JENNINGS                                       | 12 NICHOLAS BROWN YARD<br>PROVIDENCE, RI 02904 USA                |
| DIRECTOR       | SUSAN LAPIDUS   | ONE REGENCY PLAZA 801<br>PROVIDENCE, RI 02903                     |

**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**

DIANA D. BURDETT 250 WASHINGTON STREET P.O. BOX 5639 PROVIDENCE , RI 02903

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

**Signed this 28 Day of June, 2019 at 4:41:22 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 DIANA BURDETT  
Signature of Authorized Person

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