



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

6

624190

**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 ORGANIZATIONS, 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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	MATTHEW CASEY ESQ	471 W. SHORE RD WARWICK, RI 02889 KEN
TREASURER	PAUL CAPUANO	ONE PARDONS WOOD LANE EAST GREENWICH, RI 02818 USA
SECRETARY	GLORIA SHAFABEE MOGHADAM	35 MAPLECREST DR GREENVILLE, RI 02828 USA
VICE PRESIDENT	MARITZA PEREZ	41 CENTRAL ST CRANSTON, RI 02905 USA
DIRECTOR	ELENA ALMONTE	33 PRUDENCE AVE PROVIDENCE, RI 02909 USA
DIRECTOR	SHAMUS DURAC ESQ	EVERGREEN ST. PROVIDENCE, RI 02906 USA
DIRECTOR	JAY FRAILS	47 TAYLOR DR. RUMFORD, RI 02916 USA
DIRECTOR	ELIZABETH MESSIER CPA	33 SETH DR. ATTLEBORO, MA 02703 USA
DIRECTOR	MARCUS MITCHELL	135 ABBOTT ST PROVIDENCE, RI 02906 USA
DIRECTOR	RICHARD MORSE	50 GLENSIDE DR. BLACKSTONE, MA 01504 USA
DIRECTOR	WILMAR JENNINGS	12 NICHOLAS BROWN YARD PROVIDENCE, RI 02904 USA
DIRECTOR	SUSAN LAPIDUS	ONE REGENCY PLAZA 801 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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