RI SOS Filing Number: 202044045120 Date: 6/30/2020 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

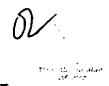
Annual Report for the year: 2020
Non-Profit Corporation

-> Filing period: June 1 - June 30

→ Filing Fee: \$20.00

-> Penalty: Additional \$25.00 fee If form is not filed by July 30.

FILED
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1. Entity ID Number		2. Exact name of the Corporation				
87605		are Two, Ir				
3. State of Incorporation	5. Brief description	Brief description of the character of business conducted in Rhode Island				
Rhode Island	To provide el	To provide elderly or disabled person with housing facilities and services.				
4. NAICS Code	}					
624120 - Services for Elderly						
6. Principal Office Address			City	State	Zip	
443 Hope Street			Bristol	RI	02809	
7. List ALL officers (names and addresses) Check the box to indicate an attachment						
President Name Josue D. Canarlo			Vice-President Name Anthony Ma	Vice-President Name Anthony Marouchoc		
Street Address 15 Riverview Avenue				Street Address 61 John Kesson Lane		
^{City} Bristol	State RI	^{Zip} 02809	City Middletown	State RI	^{Zip} 02842	
Secretary Name Aida Cabral			Treasurer Name Denise Asciola	Treasurer Name Denise Asciola		
Street Address 3 Highviow Avenue				Street Address 50 Brooksfarm Drive		
^{City} Bristol	State RI	^{Zlp} 02809	City Bristol	State RI	^{Zip} 02809	
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment						
Director Name Bette Walpole			Director Name Russ Mello	Director Name Russ Mello		
Street Address 30 Bay View Avenue			Street Address 87 Arlington Aver	Street Address 87 Arlington Avenue		
^{Clly} Bristol	State RI	^{Zip} 02809	City Warren	State RI	^{Zip} 02885	
Director Name Vicky White			Director Name Mary Moreira			
Street Address 2 Ursula Drive			Street Address 570 Wood Street	Street Address 570 Wood Street		
^{City} Bristol	State RI	^{Zip} 02809	^{City} Bristol	State RI	^{Zlp} 02809	
9. Registered Agent in Rhode Island. This Information is currently of record in the Department of State. Changes require filing Form 641.						
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.						
			cretary, Treasurer, duly Authorized Representati	ive, Receiver or Trustee	J	
Name of Officer/Authorized Representative				Date		
Josue D. Canario, President						
Signature of Officer/Authorized Representative SIGN DOCUMENT HERE						

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.rl.gov

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2020; CORPORATE ID NO. #87605

ADDITIONAL DIRECTORS FOR ELDER CARE TWO, INC.

Kathy Bazinet 63 Duffield Road Bristol, RI 02809 Catherine Tattrie 8 Schoolhouse Rd. Warren, RI 02885