



**State of Rhode Island
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: 2020

1. Corporate ID No. 000027186

2. Name of Corporation BENEFICENT HOUSE

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
531110

4. Corporate Address in Rhode Island

No. and Street: 1 CHESTNUT STREET
MANAGEMENT OFFICE

City or Town: PROVIDENCE State: RI Zip: 02903 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 PROVIDE AFFORDABLE HOUSING AND RELATED FACILIIES AND SERVICES FOR QUALIFYING PERSONS OF DIVERSE BACKGROUNDS.

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Incorporator is no longer applicable; please delete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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	TERRY BONTRAGER	38 RADCLIFF AVE PROVIDENCE, RI 02908 USA
VICE PRESIDENT	JAY FRAILS	47 TAYLOR DR RUMFORD, RI 02916 USA
TREASURER	REV. DENNIS KNIGHT	1303 FOREST PARK DR AUBURN, MA 01501 USA
ASSISTANT TREASURER	IRENE HOPE	15 RIDGEFIELD DR E. GREENWICH, RI 02818 USA
DIRECTOR	KEVIN NELSON	2 OAK VIEW AVE CRANSTON, RI 02921 USA
DIRECTOR	JOSEPH BERETTA	50 GRANDVIEW AVE LINCOLN, RI 02865 USA
DIRECTOR	TED JAKUBOWSKI	22 CONANT LN KINGSTON, RI 02881 USA
DIRECTOR	APRIL LAU	9 CIRCUIT DR RIVERSIDE, RI 02915 USA
DIRECTOR	PETER DICRISTOFARO	4 EDWARD ST PROVIDENCE, RI 02904 USA
SECRETARY	IRENE HOPE	15 RIDGEFIELD DR E. GREENWICH, RI 02818 USA
ASSISTANT SECRETARY	KEVIN NELSON	2 OAK VIEW DR CRANSTON , RI 02921 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**

IRENE L. HOPE 1 CHESTNUT STREET MANAGEMENT OFFICE 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 July, 2020 at 11:36:22 AM 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 JASMIN CHAPRON
Signature of Authorized Person

Form No. 631
Revised 09/07

