	State of Rhode Island Office of the Secretary of Stat	Fee: \$20.00
	Division Of Business Services 148 W. River Street	
HOPE	Providence RI 02904-2615 (401) 222-3040	
Non-Profit Corpo	ration	
Annual Report Filing Period: June 1 -	June 30	
	I.G.L. 7-6-94, each corporation failing or refusing to file prescribed by law (R.I.G.L. 7-6-91) is subject to a pena	
ANNUAL REPORT Y	EAR: <u>2020</u>	
1. Corporate ID No.	001692086	
2. Name of Corpora	ation Be Great For Nate Incorporated	
3. State of Incorpo	ation	
State: <u>RI</u>		
of activity in which yo based on the chosen	abeled NAICS Code below, select the classification titl ur entity engages. The box to the right of the dropdown selection. If the NAICS Code is known, enter it into the ting a classification <u>click here.</u>	n will populate a NAICS Code
4. Corporate Addres	se in Rhode Island	
-		
	<u>1016 EAST MAIN ROAD</u> <u>PORTSMOUTH</u> State: RI Z	ip: <u>02871</u> Country: USA
5. Foreign Corporat	ion. 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
<u>THE PURPOSE OI</u> <u>AREAS OF</u>	THIS CORPORATION IS TO ASSIST YOUTH	I IN EXPLORING THEIR
	L EMOTIONAL DEVELOPMENT AND SUPPO	ORT WITHIN THEIR
COMMUNITIES. WILL BE DONE B		ECTING VOLITH TO THE

<u>SYSTEMS THAT</u> <u>SURROUND THEM IN</u> THEIR COMMUNITY.

SAID CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, EDUCATIONAL, AND SCIENTIFIC PURPOSES, INCLUDING, FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, OR THE CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	RICHARD PETER BRUNO JR	18 SPRAGUE STREET PORTSMOUTH, RI 02871 US
TREASURER	MICHEAL J FORD	97 MASSASOIT AVE PORTSMOUTH, RI 02871 US
SECRETARY	MARCIA BLACKBURN	95 FIELDSTONE DRIVE PORTSMOUTH, RI 02871 US
CEO	STEVEN E PETERSON	88 COVE STREET PORTSMOUTH, RI 02871 US
DIRECTOR	RAYMOND NOREAU	72 LOCK LN PORTSMOUTH, RI 02871 US
DIRECTOR	ANGELA VOLPICELLI	31 LAWTON BROOK LANE PORTSMOUTH, RI 02871 US
DIRECTOR	FRANCINE MARY ROY	57 HIGH HAWK ROAD PORTSMOUTH, RI 02871 US
DIRECTOR	KEVIN VENDITUOLI	28C POTTERSVILLE ROAD LITTLE COMPTON, RI 02837 US
DIRECTOR	HEATHER STROUT	9 COLLINS TER MIDDLETOWN, RI 02842 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

STEVEN E PETERSON 1016 E MAIN ROAD PORTSMOUTH, RI 02871

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

Signed this 30 Day of October, 2020 at 5:06:47 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 <u>STEVEN E PETERSON</u> Signature of Authorized Person

Form No. 631 Revised 09/07

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