



**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. 001677437

2. Name of Corporation Green Castle Agriculture Inc

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



624219

4. Principal Office Address

No. and Street: 49 STANSBURY 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:

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

GREEN CASTLE IS A THERAPEUTIC, CHARITABLE AND EDUCATIONAL ORGANIZATION THAT WILL PROVIDE AGRICULTURAL PROGRAMS TO TARGETED POPULATIONS SUCH AS SCHOOL CHILDREN, SENIORS AND RETURNING COMBAT VETERANS. GREEN CASTLE WILL ALSO PROVIDE CLASSES TO THE COMMUNITY TEACH HOW TO GROW, HARVEST, PREPARE AND PRESERVE THEIR OWN FOOD TO INCREASE THEIR INTAKE OF FRESH FRUIT, VEGETABLES AND CULINARY HERBS TO PROMOTE THEIR HEALTH AND WELL BEING. ADDITIONALLY, GREEN ACRES WILL DONATE EXCESS FRESH

PRODUCE TO FOOD PANTRIES AND SOUP KITCHENS IN THE WARREN AREA AND OTHER AREAS AS WELL.

6. Names and Addresses of the Officers and Directors:

All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	CATHERINE B. DEAN	49 STANSBURY ST. PROVIDENCE, RI 02908 UNI
TREASURER	CATHERINE B DEAN	49 STANSBURY ST PROVIDENCE, RI 02908 USA
SECRETARY	ADELE RENZULLI	51 COWESETT GREEN DR. WARWICK, RI 02886 USA
VICE PRESIDENT	RANDY T. WHITE JR.	138 LEXINGTON ST. PROVIDENCE, RI 02907 USA
DIRECTOR	CATHERINE B DEAN	49 STANSBURY ST. PROVIDENCE, RI 02908 USA
DIRECTOR	RANDY T. WHITE JR.	138 LEXINGTON ST. PROVIDENCE, RI 02907 USA
DIRECTOR	ADELE RENZULLI	51 COWESETT GREEN DR. WARWICK, RI 02886 USA

**7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

CATHERINE B DEAN 49 STANSBURY STREET PROVIDENCE , RI 02908

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

Signed this 17 Day of March, 2021 at 10:24:47 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 CATHERINE DEAN
Signature of Authorized Person

Form No. 631
Revised 09/07