



**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: 2021

1. Corporate ID No. 000026423

2. Name of Corporation AMOS 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

4. Principal Office Address

No. and Street: 460 PINE STREET
City or Town: PROVIDENCE State: RI Zip: 02907 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

EMERGENCY FOOD AND SHELTER SERVICE

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	EILEEN HAYES	415 FRIENDSHIP PROVIDENCE, RI 02907 USA
DIRECTOR	GEORGE KINNEAR	100 WESTMINSTER STREET PROVIDENCE, RI 02860 USA
DIRECTOR	LISA BALLOU	11 SOUTH ANGELL ST, #368 PROVIDENCE, RI 02906 USA
DIRECTOR	PATRICK QUINN	56 EXCHANGE TERRACE PROVIDENCE, RI 02903 USA
DIRECTOR	FLA LEWIS	72 SOUTH MAIN STREET PROVIDENCE, RI 02906 USA
DIRECTOR	ROBERT DUFFY	1800 FINANCIAL PLAZA PROVIDENCE, RI 02903 USA
DIRECTOR	DENNIS LEAMY	10 AMICA CENTER BLVD. LINCOLN, RI 02865 USA
DIRECTOR	SUSAN LONEY	11 SOUTH ANGELL ST. PROVIDENCE, RI 02906 USA
DIRECTOR	ANGELA ANKOMA	50 VALLEY STREET PROVIDENCE, RI 02909 USA
DIRECTOR	GARY LEVINE	56 PINE STREET, SUITE 250 PROVIDENCE, RI 02907 USA
DIRECTOR	MEKO LINCOLN	460 PINE STREET PROVIDENCE, RI 02907 USA
DIRECTOR	PAUL CONFORTI	375 COMMERCE PARK ROAD NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	JAMES HAGERTY	23 BROAD STREET PROVIDENCE, RI 02903 USA
DIRECTOR	JOHN FARBER	105 FREEMAN PARKWAY PROVIDENCE, RI 02906 USA
DIRECTOR	GUILLAUME BEGAL	500 EXCHANGE ST. PROVIDENCE, RI 02903 USA
DIRECTOR	MIKE COSTA	70 EVERETT AVENUE BRISTOL, RI 02809 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**

EILEEN HAYES 415 FRIENDSHIP STREET PROVIDENCE , RI 02907

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

Signed this 14 Day of June, 2021 at 9:22:53 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 EILEEN HAYES
Signature of Authorized Person

Form No. 631
Revised 09/07

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