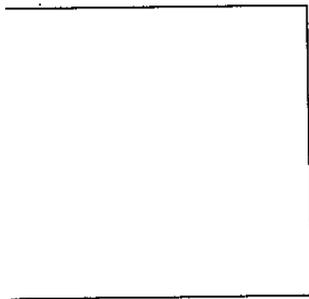




State of Rhode Island
Department of State - Business Services Division



Annual Report for the year: 2021

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.

1. Entity ID Number 136071	2. Exact name of the Corporation Lighthouse Community Development Corporation
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3. State of Incorporation RI	5. Brief description of the character of business conducted in Rhode Island Social services including food pantry, health screenings and anger management
4. NAICS Code 624210 - Community Food Se	

6. Principal Office Address 11 Hawthorne Street	City Providence	State RI	Zip 02907
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7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Jacqueline Britto			Vice-President Name		
Street Address 36 Togansett Road			Street Address		
City Providence	State RI	Zip 02907	City	State	Zip
Secretary Name Michell Macias			Treasurer Name Anthony Black		
Street Address 116 Roosevelt Street			Street Address 54 Delmar Avenue		
City Providence	State RI	Zip 02907	City Providence	State RI	Zip 02907

8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Majorie Delille			Director Name Sherry Olink		
Street Address 63 Budlong avenue			Street Address 3174 Post Road		
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 02907
Director Name Anthony Black			Director Name		
Street Address 54 Delmar Avenue			Street Address		
City Providence	State RI	Zip 02907	City	State	Zip

9. The Registered Agent information of record with the RI Department of State is accurate. 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.

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

Name of Officer/Authorized Representative Anthony Black	Date 6/14/2021
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Signature of Officer/Authorized Representative

FILED

JUN 21 2021
 BY 1322 A.A.