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.

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2020 MAY 11

1. Entity ID Number: 148607	2. Exact name of the Corporation: Haiti Charity Hope
3. State of Incorporation: RI	5. Brief description of the character of business conducted in Rhode Island: Organization - religious, educational, charitable to a community in Haiti
4. NAICS Code: 813311	

6. Principal Office Address	City	State	Zip
P.O. Box 114136	No. Providence	RI	02911

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name	Street Address	City	State	Zip	Vice-President Name	Street Address	City	State	Zip
Marie Gabriel	158 West Street	W. Warwick	RI	02893	Jack Hurley Jr.	68 Farnum Pike	Smithfield	RI	02917

Secretary Name	Street Address	City	State	Zip	Treasurer Name	Street Address	City	State	Zip
Jenny Gabriel →	158 West Street	W. Warwick	RI	02893	None	None	None	None	None

8. List ALL directors (names and addresses). RI Corporations **MUST** list at least **THREE** directors. — Check the box to indicate an attachment ☐

Director Name	Street Address	City	State	Zip	Director Name	Street Address	City	State	Zip
David Difilippo	30 Bolfe Square	Cranston	RI	02910	Gwen Kania	30 Bolfe Square	Cranston	RI	02910
Mary Watkinson	51 Sherman Ave	Bristol	RI	02809	None	None	None	None	None

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	Date
Marie Gabriel	5/14/21

Signature of Officer/Authorized Representative

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BY 2:18

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FORM 631 - Revised: 08/2020