



**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. 001070252

2. Name of Corporation SHEPHERD 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: 11 MILANO STREET
City or Town: PROVIDENCE State: RI Zip: 02904 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

TO PROVIDE THE BEST ADULT DAY HEALTH CARE SERVICES TO ELDERS AND
DISABLED ADULTS IN A SAFE, TRUSTING AND CARING ENVIRONMENT AND RELATED
ACTIVITIES

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
CEO	EVA LEVONE SMITH	11 MILANO STREET PROVIDENCE, RI 02904
DIRECTOR	TAWAI GBOLLIE	6939 YELLOWSTONE BOUELVARD, APOT 111 FORESTHILL , NY 11375 USA
DIRECTOR	FINDAYAWAH GBOLLIE	90 HARBOR LOOP #A STATEN ISLAND, NY 10303 USA
DIRECTOR	DENICE EDWARD	24 MORPHEAUS DRIVE CUMBERLAND, RI 02864 USA
DIRECTOR	LILLYMAE KARPEH	36 WILNA STREET PROVIDENCE, RI 00000 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**

EVA LEVONE SMITH 11 MILANO STREET PROVIDENCE , RI 02904

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

Signed this 25 Day of July, 2021 at 12:12:01 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 EVA L. SMITH
Signature of Authorized Person

Form No. 631
Revised 09/07

© 2007 - 2021 State of Rhode Island
All Rights Reserved