



**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: February 1 - May 1

*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:** 2022

**1. Corporate ID No.** 000159105

**2. Name of Corporation** House of Hope Of Rhode Island, 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

**4. Principal Office Address**

No. and Street: 155 INDIAN TRAIL  
City or Town: SAUNDERSTOWN State: RI Zip: 02874 Country: USA

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

CHARITABLE, RELIGIOUS, EDUCATIONAL AND SCIENTIFIC PURPOSES

**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	JANE STACH	155 INDIAN TRAIL SAUNDERSTOWN, RI 02874 USA
TREASURER	JOSEPH MICHAEL MANNING	78 STARR DR

		NARRAGANSETT, RI 02874 USA
SECRETARY	ANNE VIRGINIA MANNING	78 STARR DR NARRAGANSETT, RI 02882 USA
DIRECTOR	ANNE VIRGINIA MANNING	78 STARR DR NARRAGANSETT, RI 02882 USA
DIRECTOR	JANE STACH	155 INDIAN TR SAUNDERSTOWN, RH 02874 US
DIRECTOR	JOSEPH MICHAEL MANNING	78 STARR DR NARRAGANSETT, RI 02882 US

**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**

DANA P. ALTLAND 623 OAK HILL ROAD NORTH KINGSTOWN , RI 02852

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

**Signed this 23 Day of December, 2021 at 4:46:08 PM 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 JANE E STACH  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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