



**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. 000043684

2. Name of Corporation Harmony Womens Care

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: 845 NORTH MAIN STREET
SUITE 3

City or Town: PROVIDENCE State: RI Zip: 02904 Country: USA

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

EDUCATIONAL AGENCY

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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
EXECUTIVE DIRECTOR	RACHEL NGUYEN	272 HARRINGTON AVENUE WARWICK, RI 02888 USA

TREASURER	TRISH HARRINGTON	19 WINDMILL LANE RUMFORD, RI 02916 USA
MEDICAL DIRECTOR	KATHLEEN KOHLS MD	271 LYNCH AVENUE SOMERSET, MA 02726 USA
DIRECTOR	RICHARD MERINGOLO	85 CENTRAL STREET NARRAGANSETT, RI 02882 USA
VICE PRESIDENT	JIM NOONEY	16 OCEAN RIDGE DRIVE CHARLESTOWN, RI 02813 USA
SECRETARY	SCOTT J ASADORIAN	583 SHORE ACRES AVENUE NORTH KINGSTOWN, RI 02852 USA
PRESIDENT	MELINDA PENNEY	247 WAYLAND AVE #1 PROVIDENCE, RI 02906 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

RACHEL NGUYEN 35 GREENWICH 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 13 Day of April, 2022 at 2:18:42 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 RACHEL E NGUYEN
Signature of Authorized Person

Form No. 631
Revised 09/07

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