



**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. 001728492

2. Name of Corporation Melvin & Euphemia Charity hands Foundation

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: 223 WALDO ST APT 1

City or Town: PROVIDENCE

State: RI

Zip: 02909

Country: USA

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

TO SUPPORT WITH THE WELL BEING OF THE LESS FORTUNATE YOUTH HERE IN THE COMMUNITY IN AMERICA AND BACK HOME IN LIBERIA. THE CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, EDUCATIONAL AND SCIENTIFIC PURPOSES, INCLUDING FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS AN EXEMPT ORGANIZATION UNDER SECTION 501 (C)(3) OF THE INTERNAL REVENUE CODE, OR THE CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE.

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 |
|--------------|---|---|
| INCORPORATOR | MELVIN B DAVIS | 223 WALDO STREET PROVIDENCE, RI 02909 USA |
| DIRECTOR | MELVIN B DAVIS | 223 WALDO STREET PROVIDENCE, RI 02909 USA |
| DIRECTOR | EUPHEMIA S DAVIS | 299 VERNON AVENUE PROVIDENCE, RI 02905 USA |
| DIRECTOR | MARDEA A HALLEY RN, RSN | 194 OHIO AVENUE, 1ST FLOOR PROVIDENCE, RI 02905 USA |
| DIRECTOR | PEARL LEE | 223 WALDO ST APT 1 PROVIDENCE, RI 02909 USA |
| DIRECTOR | MAIMA WATSON | 223 WALDO ST APT 1 PROVIDENCE, RI 02909 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

MELVIN B DAVIS 223 WALDO STREET PROVIDENCE , RI 02909

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

Signed this 19 Day of April, 2022 at 9:38:44 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 MELVIN DAVIS
Signature of Authorized Person

Form No. 631
Revised 09/07

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