

State of Rhode Island Office of the Secretary of State

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. 001695407

2. Name of Corporation We're Just People

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 <u>click here.</u>

NAICS Code

>

Fee: \$20.00

624210

4. Principal Office Address

No. and Street: 16 OAKHURST DRIVE

City or Town: <u>GREENVILLE</u> State: <u>RI</u> Zip: <u>02828</u> Country: <u>USA</u>

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

ASSISTING THE HOMELESS, THOSE LIVING IN SHELTERS AND LOW INCOME INDIVIDUALS WITH FOOD, CLOTHING, RESOURCES AND OTHER BASIC NECESSARY ESSENTIALS.

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
DIRECTOR	BARBARA M FLANAGAN	16 OAKHURST DRIVE

		GREENVILLE, RI 02828 USA
DIRECTOR	MARGARET FETTE	289 PULASKI ROAD HARRISVILLE, RI 02830 USA
DIRECTOR	ROSEMARY PRESTON	697 PLEASANT STREET PAWTUCKET, RI 02860 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

MICHAEL J. ORABONA, CPA, MST PARTNER 931 JEFFERSON BOULEVARD, SUITE 3006 WARWICK, RI 02886

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 9:45:45 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 MICHAEL J ORABONA

Signature of Authorized Person

Form No. 631 Revised 09/07

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