



**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. 000163013

2. Name of Corporation Social Enterprise Greenhouse

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: 10 DAVOL SQUARE
SUITE 100

City or Town: PROVIDENCE State: RI Zip: 02903 Country: USA

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

RELIGIOUS, CHARITABLE, SCIENTIFIC, TESTING FOR PUBLIC SAFETY, LITERARY, OR EDUCATIONAL PURPOSES, AS SPECIFIED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE OF 1986, AS AMENDED, OR THE CORRESPONDING PROVISION OF ANY FUTURE UNITED STATES INTERNAL REVENUE LAW (THE CODE). SUCH PURPOSES SHALL BE FURTHERED BY ACTIVITIES, WHICH INCLUDE BUT ARE NOT LIMITED TO BE A CATALYST FOR SIGNIFICANT, LONG-TERM, POSITIVE SOCIAL CHANGE IN THE COMMUNITY AND, IN PARTICULAR, TO CREATE POSITIVE SOCIAL AND ECONOMIC IMPACT BY SUPPORTING SOCIAL ENTREPRENEURS AND SOCIAL ENTERPRISES THROUGH EDUCATION, SUPPORT, AND COMMUNICATIONS WITH OTHER SOCIAL ENTREPRENEURS AND NETWORKS THAT PROVIDE ENCOURAGEMENT, ORGANIZATIONAL SKILLS, AND FINANCIAL RESOURCES TO

ASSIST THEM TO THRIVE.

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
TREASURER	SCOT JONES	275 FORGE ROAD NO. KINGSTOWN, RI 02852 USA
SECRETARY	GARY RINDNER	7 COHASSET WAY WESTERLY, RI 02891 USA
CEO	KELLY RAMIREZ	109 ELMGROVE AVE PROVIDENCE, RI 02906 USA
COO	MATTHEW RAMIREZ	329 SHARON STREET PROVIDENCE, RI 02908 USA
VICE CHAIR	KIM ANDERSON	170 ADAMS POINT BARRINGTON, RI 02806 USA
CO-CHAIR	KATHY BENDHEIM	10 WOODHAVEN ROAD BARRINGTON, RI 02806 USA
CO-CHAIR	MARY J KAPLAN	283 WAYLAND AVENUE PROVIDENCE, RI 02906 USA
VICE CHAIR	CLAUDIA CARDOZO	741 ACADEMY AVE PROVIDENCE, RI 02908 USA
DIRECTOR	MICHAEL HENDERSON	10 DAVOL SQ, SUITE 100 PROVIDENCE, RI 02903 USA
DIRECTOR	MARK MAROSITS	45 THIRD STREET NEWPORT, RI 02840 USA
DIRECTOR	REBEKA MAZZONE	449 THAMES STREET SUITE 111 NEWPORT, RI 02840 USA
DIRECTOR	JIM SEYMOUR	11 HARBOR COURT NO. KINGSTOWN, RI 02852 USA
DIRECTOR	DAN CROCKER	14 FIRE LANE 1 WAKEFIELD, RI 02879 USA
DIRECTOR	DWAYNE KEYS	391 PINE STREET PROVIDENCE, RI 02903 USA
DIRECTOR	DAVID MELANÇON	56 CONCH ROAD NARRAGANSETT, RI 02882 USA
DIRECTOR	JULIA MCDOWELL	3 CATALPA RD PROVIDENCE, RI 02906 USA
DIRECTOR	SONIA MILLSOM	11 SQUIRREL LANE EAST GREENWICH, RI 02818 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**

TOBIAS LEDERBERG 400 WESTMINSTER STREET, SUITE 200 PROVIDENCE , RI 02903

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

Signed this 6 Day of June, 2022 at 5:18:22 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 MATTHEW RAMIREZ
Signature of Authorized Person

Form No. 631
Revised 09/07

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