	State of Rhode Office of the Secreta		Fee: \$20.00	
	Division Of Business 148 W. River S			
HOPE	Providence RI 0290 (401) 222-304			
Non-Profit Corporation Annual Report				
Filing Period: February 1 - May 1 In accordance with R.I.G.L. 7-6-9 report within the time prescribed \$25.00.				
ANNUAL REPORT YEAR: 202	2			
1. Corporate ID No. 001679287				
2. Name of Corporation <u>Memere's Mission</u>				
3. State of Incorporation				
State: <u>RI</u>				
based on the chosen selection. assistance with selecting a clas		ter it into the box on the	e right. For further	
<u>813219</u>				
4. Principal Office Address				
No. and Street:1372 DOCity or Town:SMITHF	UGLAS PIKE IELD State:	<u>RI</u> Zip: <u>02917</u>	Country: <u>USA</u>	
5. Brief Description of the Cha	aracter of the Affairs Conduct	ed in Rhode Island		
TO HELP AND BETTER THE LIVES OF THOSE WHO ARE LESS FORTUNATE				
6. Names and Addresses of th	e 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		Iress	
	First, Middle, Last, Suffix	Address, City or Town, S		
DIRECTOR	MICHELLE ANN LALIBERTE	1372 DO SMITHFIELD,	State, Zip Code, Country	

		SMITHFIELD, RI 02917 USA		
DIRECTOR	SAMANTHA ANN LALIBERTE	1372 DOUGLAS PIKE SMITHFIELD, RI 02917 USA		
DIRECTOR	KATIE MCINTOSH	10 HILLSIDE ST SMITHFIELD, RI 02917 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				
MICHELLE LALIBERTE 1372 DOUGLAS PIKE SMITHFIELD, RI 02917				
8. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.				
 Signed this 21 Day of July, 2022 at 1:46:24 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 <u>MICHELLE LALIBERTE</u> Signature of Authorized Person 				
Form No. 631 Revised 09/07				
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