



**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. 000556699

2. Name of Corporation VILLAGE DE LA PROMESSE

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

624190

4. Principal Office Address

No. and Street: 12 LINCOLN AVENUE

City or Town: CRANSTON

State: RI

Zip: 02920

Country: USA

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

TO SEEK SUPPORT FROM ORGANIZATIONS TO SUPPORT SPECIAL PROJECTS OF CONSTRUCTING SCHOOLS ALL AROUND THE WORLD, ESPECIALLY THE SCHOOL IN MASSAN HAITI

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
PRESIDENT	JEAN WILFRID ALTERA	33 PRISCILLA AVENUE PROVIDENCE , RI 02909 RI
SECRETARY	MARGUERITE ACCEDE JOLICOEUR	8 MEADOW AVENUE NORTH PROVIDENCE, RI 02911 RI
DIRECTOR	HOMERE DOR SAINVILLE	185 PAVILLION AVENUE PROVIDENCE, RI 02905 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**

MARIE MISLIN 12 LINCOLN AVENUE CRANSTON , RI 02920

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

Signed this 18 Day of August, 2022 at 2:42:09 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 MARGUERITE A JOLICOEUR
Signature of Authorized Person

Form No. 631
Revised 09/07

© 2007 - 2022 State of Rhode Island
All Rights Reserved