RI SOS Filing Number: 202326455650 Date: 1/23/2023 2:07:00 PM



## 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: 2023

- 1. Corporate ID No. 000041512
- **2.** Name of Corporation <u>HABITAT FOR HUMANITY OF RHODE ISLAND GREATER</u> PROVIDENCE, INC
- 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

624229

## 4. Principal Office Address

No. and Street: <u>137R DEAN ST</u>

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

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

TO ELIMINATE SUBSTANDARD HOUSING IN COMMUNITIES IN THE GREATER PROVIDENCE, RI AREA BY CONSTRUCTING SIMPLE, DECENT, AFFORDABLE OWNERSHIP HOUSES IN PARTNERSHIP WITH PEOPLE IN NEED, VOLUNTEERS, BUSINESSES, CHURCHS, ETC.

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<br>First, Middle, Last, Suffix | Address Address, City or Town, State, Zip Code, Country |
|--------------------|--|---|
| PRESIDENT          | JOHN MEARA ESQ.                                | 71 APPLEGATE RD.<br>CRANSTON, RI 02920 USA              |
| SECRETARY          | WINSHANAI GANDY                                | 150 E. 34TH ST., APT 1804<br>NEW YORK, NY 10016 USA     |
| CEO                | AZADE SARAH PERIN<br>MONTERROSO                | 137R DEAN<br>PROVIDENCE, RI 02903 US                    |
| EXECUTIVE DIRECTOR | AZADE SARAH PERIN-<br>MONTERROSO               | 44 RANKIN AVE<br>PROVIDENCE, RI 02908 USA               |
| DIRECTOR           | ROBERT BOHLEN                                  | 132 WOODBINE ST.<br>PROVIDENCE, RI 02906 USA            |
| DIRECTOR           | AMANDA HEINSEN                                 | 1377 WESTMINSTER ST.<br>PROVIDENCE, RI 02909 USA        |
| DIRECTOR           | SHELLEY PETERSON                               | 49 ERIE ST.<br>PROVIDENCE, RI 02908 USA                 |
| DIRECTOR           | MARK RHOADS                                    | 31 ROCK ST.<br>NORWOOD, MA 02062 USA                    |
| DIRECTOR           | MELISSA DOMINGUEZ                              | 379 FRIENDSHIP ST<br>PROVIDENCE, RI 02907 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

JOHN MEARA 460 HARRIS AVENUE, UNIT 203 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 23 Day of January, 2023 at 2:10:41 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>AZADE PERIN-MONTERROSO</u> Signature of Authorized Person

Form No. 631 Revised 09/07

Revised 09/07