



**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.** 000026549

**2. Name of Corporation** HOPE LIBRARY ASSOCIATION

**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  
519120

**4. Principal Office Address**

No. and Street: 374 NORTH ROAD  
City or Town: HOPE State: RI Zip: 02831 Country: USA

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

LIBRARY

**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
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TREASURER	CAROL SWANSON	593 NATICK AVE CRANSTON, RI 02921 USA
SECRETARY	CANDANCE COLLINS	151 FRANKLIN ROAD FOSTER, RI 02825 USA
LIBRARY DIRECTOR	CORA MORRIGAN	72 HARTFORD PIKE NORTH SCITUATE, RI 02857 USA
PRESIDENT	BRENDA GARDINER	71 CRANBERRY DR. HOPE, RI 02831 USA
DIRECTOR	DONNA FARIA	282 GLEANER CHAPEL RD. NORTH SCITUATE, RI 02857 USA
VICE PRESIDENT	EILEEN GODBOUT	61 CRANBERRY DRIVE HOPE, RI 02831 USA
DIRECTOR	MARY MORSE	404 NORTH ROAD HOPE, RI 02831 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**

PAULA J. DIBIASE 374 NORTH ROAD HOPE , RI 02831

**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 February, 2023 at 5:33:54 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 CORA MORRIGAN  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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