

**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.** 000622504**2. Name of Corporation** The Herren Project**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

813319**4. Principal Office Address**No. and Street: P.O. BOX 131City or Town: PORTSMOUTH State: RI Zip: 02871 Country: USA**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**CHARITABLE**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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PRESIDENT	RYAN CONNOLLY	350 GIFFORD STREET, UNIT W-20B FALMOUTH, MA 02540 USA
TREASURER	KENNETH LEE COLEMAN	133 SHAW RD. BROOKLINE, MA 02467 USA
SECRETARY	ROBERT HOROWITZ	350 GIFFORD STREET, UNIT W-20B FALMOUTH, MA 02540 USA
DIRECTOR	ERIN CHACE	350 GIFFORD STREET, UNIT W-20B FALMOUTH, MA 02540 USA
DIRECTOR	KEVIN GILL	350 GIFFORD STREET, UNIT W-20B FALMOUTH, MA 02540 USA
DIRECTOR	JOHN SEED	350 GIFFORD STREET, UNIT W-20B FALMOUTH, MA 02540 USA
DIRECTOR	SHIKARA FERNANDES	PO BOX 131 PORTSMOUTH, RI 02871 USA
DIRECTOR	ROBERT EAGAN	PO BOX 131 PORTSMOUTH, RI 02871 USA
DIRECTOR	KATHERINE SHARRY	PO BOX 131 PORTSMOUTH, RI 02871 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

JEFFREY B. CIANCIOLO, ESQ. 148 WEST RIVER STREET, SUITE 1E PROVIDENCE , RI 02904

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

Signed this 19 Day of April, 2023 at 3:41:27 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 RYAN CONNOLLY
Signature of Authorized Person

Form No. 631
Revised 09/07