



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: 2023

Non-Profit Corporation

- Filing period: February 1 - May 1  
→ Filing Fee: \$20.00  
→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

**FILED**

MAY 10 2023

BY

1. Entity ID Number <b>27348</b>		2. Exact name of the Corporation <b>Mathews Herman Foundation</b>			
3. State of Incorporation <b>Rhode Island</b>		5. Brief description of the character of business conducted in Rhode Island <b>Make charitable contributions to selected charities</b>			
4. NAICS Code <b>813211</b>					
6. Principal Office Address <b>501 Centerville Rd, Suite 103</b>			City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Stephanie Herman</b>			Vice-President Name <b>Scot Herman</b>		
Street Address <b>5403 Castillo Glen</b>			Street Address <b>8255 S. Las Vegas Blvd. Unit 2001</b>		
City <b>San Diego</b>	State <b>CA</b>	Zip <b>92130</b>	City <b>Las Vegas</b>	State <b>NV</b>	Zip <b>89123</b>
Secretary Name <b>Carol K. Mathews</b>			Treasurer Name <b>Carol K Mathews</b>		
Street Address <b>5077 Siros Way</b>			Street Address <b>5044 Siros Way</b>		
City <b>Oceanside</b>	State <b>CA</b>	Zip <b>92056</b>	City <b>Oceanside</b>	State <b>CA</b>	Zip <b>92056</b>
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Carol K Mathews</b>			Director Name <b>Lisa Herman</b>		
Street Address <b>5077 Siros Way</b>			Street Address <b>5077 Siros Way</b>		
City <b>Oceanside</b>	State <b>CA</b>	Zip <b>92056</b>	City <b>Oceanside</b>	State <b>CA</b>	Zip <b>92056</b>
Director Name <b>Colleen Dunne</b>			Director Name		
Street Address <b>1212 Pacific Beach Drive</b>			Street Address		
City <b>San Diego</b>	State <b>CA</b>	Zip <b>89123</b>	City	State	Zip
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
<b>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</b>					
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</small>					
Name of Officer/Authorized Representative <b>Randolph K Dittmar</b>				Date <b>04/28/23</b>	
Signature of Officer/Authorized Representative <i>Randolph K. Dittmar</i>					

MAIL TO:  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: [www.sos.ri.gov](http://www.sos.ri.gov)