



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 - ENTER THE CURRENT FILING YEAR **2023**: 2023

1. Corporate ID No. 000159105

2. Name of Corporation House of Hope Of Rhode Island, 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

624110

4. Principal Office Address

No. and Street: 155 INDIAN TRAIL

City or Town: SAUNDERSTOWN

State: RI

Zip: 02874

Country: USA

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

CHARITABLE, RELIGIOUS, EDUCATIONAL AND SCIENTIFIC PURPOSES

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	JANE STACH	155 INDIAN TRAIL SAUNDERSTOWN, RI 02874 USA
DIRECTOR	ANNE VIRGINIA MANNING	78 STARR DR NARRAGANSETT, RI 02882 USA
SECRETARY	KALEN MARIE ARREOLA	80 WINSOR AVE NORTH KINGSTOWN, RI 02852 USA
TREASURER	ANNE VIRGINIA MANNING	78 STARR DR NARRAGANSETT, RI 02882 USA
DIRECTOR	KALEN MARIE ARREOLA	80 WINSOR AVE NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	JANE STACH	155 INDIAN TR SAUNDERSTOWN, RH 02874 US

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

DANA P. ALTLAND 623 OAK HILL ROAD NORTH KINGSTOWN , RI 02852

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

Signed this 14 Day of May, 2023 at 10:21:54 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 JANE E STACH
Signature of Authorized Person

Form No. 631
Revised 09/07

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