



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2022

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.

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R.I. DEPT. OF STATE
BUS SVCS DIV

2023 MAY 18 A 10:18

1. Entity ID Number 001663131		2. Exact name of the Corporation The Doc Gift Fund, Inc.			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Education and other beneficial gifting and to transact any or all other lawful business for which corporations may be incorporated.			
4. NAICS Code 813219					
6. Principal Office Address 32 John Street			City Providence	State RI	Zip 02906
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
President Name			Vice-President Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors					Check the box to indicate an attachment <input checked="" type="checkbox"/>
Director Name Adam Bush			Director Name Tara Hagopian		
Street Address 32 John Street			Street Address 32 John Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
Director Name Ann Gatten			Director Name Karen Thompson		
Street Address 32 John Street			Street Address 32 John Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
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.					
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee					
Name of Officer/Authorized Representative Kas R. DeCarvalho, Authorized Representative					Date May 17, 2023
Signature of Officer/Authorized Representative 					

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

FILED 1018
MAY 18 2023
BY BHRGN

The Doc Gift Fund, Inc. – Corp. ID #001663131
Attachment to 2022 Annual Report
Names and Addresses of Directors

Additional Directors:

Dennis Littky
32 John Street
Providence, RI 02906

Kaiya Leatherer
32 John Street
Providence, RI 02906

Seth Linden
32 John Street
Providence, RI 02906