RI SOS Filing Number: 202339423130 Date: 7/14/2023 6:31:00 AM



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. 000152218
- 2. Name of Corporation <u>HOPE CONGREGATIONAL CHURCH, UNITED CHURCH OF</u> CHRIST
- 3. State of Incorporation

State: RI

NAICS CODE

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

813110

4. Principal Office Address

No. and Street: 120 WAMPANOAG TRAIL

City or Town: RIVERSIDE State: RI Zip: 02915 Country: USA

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

CHURCH

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	Address

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
FINANCIAL SECRETARY	CHRIS JAWORSKI	60 BROOKFIELD ROAD EAST PROVIDENCE, RI 02915 USA
DIRECTOR	JODY RICHARDS	10 ROUNDS AVE RIVERSIDE, RI 02915 USA
DIRECTOR	CORA ROSE	2987 EAST PROVIDENCE, RI 02915 USA
DIRECTOR	RICK BUSHNELL	24 HEDLEY CIRCLE EAST PROVIDENCE, RI 02915 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

SHIRLEY LAWSON 120 WAMPANOAG TRAIL EAST PROVIDENCE, RI 02915

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 July, 2023 at 6:32:20 AM 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 JODY RICHARDS

Signature of Authorized Person

Form No. 631 Revised 09/07

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