



**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.

RECEIVED  
R.I. DEPT. OF STATE  
BUS SVCS DIV

2023 AUG 16 A 9:39

1. Entity ID Number <b>139269</b>	2. Exact name of the Corporation <b>City Meal Site, Inc.</b>
3. State of Incorporation <b>Rhode Island</b>	5. Brief description of the character of business conducted in Rhode Island <b>City Meal Site serves high-quality grab-and-go meals to needy adults in our neighborhood every Tuesday Evening</b>
4. NAICS Code <b>624210</b>	

6. Principal Office Address <b>624 Westminster Street</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</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>Charles Bodell</b>			Vice-President Name <b>Alane Spinnehy</b>		
Street Address <b>15 Jay Street</b>			Street Address <b>166 Waterman Street</b>		
City <b>Rumford</b>	State <b>RI</b>	Zip <b>02916</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>
Secretary Name <b>Jack Nolan</b>			Treasurer Name <b>Frank McGovern</b>		
Street Address <b>229 Medway Street - APT 101</b>			Street Address <b>17 Miles Avenue</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>	City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</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>John MacDonald</b>			Director Name <b>Deborah Farrar</b>		
Street Address <b>4 Robert Street</b>			Street Address <b>5 Carolann Avenue</b>		
City <b>Foxboro</b>	State <b>MA</b>	Zip <b>02035</b>	City <b>Smithfield</b>	State <b>RI</b>	Zip <b>02917</b>
Director Name <b>Bob Wells</b>			Director Name <b>Julie Hanavan</b>		
Street Address <b>16 College Road</b>			Street Address <b>38 Church Lane North</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02908</b>	City <b>Kingstown</b>	State <b>RI</b>	Zip <b>02852</b>

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 <b>Jack Nolan</b>	Date <b>14 August 2023</b>
--	-------------------------------

Signature of Officer/Authorized Representative  
*Jack Nolan, Secretary*

FILED 939

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

AUG 16 2023  
BY 4408