



**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.** 001756691

**2. Name of Corporation** Why Grief Matters

**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

624190

**4. Principal Office Address**

No. and Street: 200 EXCHANGE ST APT 717

City or Town: PROVIDENCE

State: RI Zip: 02903 Country: USA

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

THE PURPOSE OF MY GRIEF MATTERS IS TO PROVIDE THE BEST INFORMATION AVAILABLE ON GRIEF AND LOSS TO THOSE WHO ARE COPING WITH THE DEATH OF A LOVED ONE. WE BELIEVE THAT EVERY BEREAVED PERSON DESERVES THE BEST INFORMATION AVAILABLE ON GRIEF AND LOSS. WE HAVE GATHERED TOGETHER THE VERY BEST ARTICLES, STORIES.

AND OPTIONS FOR PEER SUPPORT AS WELL AS INFORMATION ABOUT OTHER WEBSITES.

THIS INFORMATION IS AVAILABLE ON OUR WEBSITE FREE OR AT A VERY MODEST COST.

**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.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
INCORPORATOR	CAMILLE WORTMAN	200 EXCHANGE ST UNIT 717, 200 EXCHANGE PROVIDENCE, RI 02903-2623 USA
DR.	CAMILLE WORTMAN	200 EXCHANGE ST APT 717 PROVIDENCE, RI 02903 UNI
DIRECTOR	CAMILLE WORTMAN	200 EXCHANGE ST UNIT 717 PROVIDENCE, RI 02903-2623 USA
DIRECTOR	ANDREW WORTMAN	334 KNIGHT STREET UNIT 1102 WARWICK, RI 02886 USA
DIRECTOR	THERESE RANDO	33 COLLEGE RD. BUILDING 30 A WARWICK, RI 02886 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**

CAMILLE WORTMAN 334 KNIGHT STREET UNIT 1102 200 EXCHANGE PROVIDENCE , RI 02903-2623

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

**Signed this 10 Day of September, 2023 at 7:51:25 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 CAMILLE WORTMAN  
Signature of Authorized Person

Form No. 631  
Revised 09/07