



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

1. Entity ID Number 000541650		2. Exact name of the Corporation 2023 OCT -4 A 9:54 Living Supplies Closet, Inc.	
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island To inspire the people of Westerly to make a difference in the lives of their neighbors through financial generosity and volunteer commitment	
4. NAICS Code 813219			
6. Principal Office Address Christ Church, 7 Elm Street		City Westerly	State RI
		Zip 02891	
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Fred Allardyce		Vice-President Name N/A	
Street Address 33 Pasadena Ave		Street Address	
City Westerly	State RI	City	State
Zip 02891		Zip	
Secretary Name David Wolf		Treasurer Name Katherine Hoxsie	
Street Address 347 Lantern Hill Rd		Street Address 38 Fenner Lane	
City Mystic	State CT	City Stonington	State CT
Zip 06355		Zip 06378	
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		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
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.			
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>			
Name of Officer/Authorized Representative Fred A. Allardyce, President			Date 10/2/23
Signature of Officer/Authorized Representative Fred A. Allardyce			

FILED

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

OCT 04 2023 9:55am

BY LKS VMMP FORM 631- Revised 04/2023

The Officers and Directors of the Corporation:

Title	Individual Name	Address
PRESIDENT	FRED A ALLARDYCE	33 PASADENA AVE WESTERLY, RI 02891 USA
TREASURER	KATHERINE W HOXSIE	38 FENNER LANE STONINGTON, CT 06378 USA
SECRETARY	DAVID NOLF	347 LANTERN HILL RD MYSTIC, CT 06355 USA
DIRECTOR	DAVID NOLF	347 LANTERN HILL RD MYSTIC, CT 06355 USA
DIRECTOR	FRED A ALLARDYCE	33 PASADENA AVENUE WESTERLY, RI 02891 USA
DIRECTOR	KATHERINE W HOXSIE	38 FENNER LANE STONINGTON, CT 06378 USA
DIRECTOR	MARION LEDDY	6 ORLEANS CT WESTERLY, RI 02891 USA
DIRECTOR	KURUVILLA K. CHANDY	7 ELM STREET WESTERLY, RI 02891 USA