



**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 YEAR 2024:** 2024

**1. Corporate ID No.** 001339285

**2. Name of Corporation** Volunteer Initiative for the Scituate Animal Shelter

**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

813219

**4. Principal Office Address**

No. and Street: 484 FIELD HILL ROAD

City or Town: CLAYVILLE

State: RI

Zip: 02815

Country: USA

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

FOR CHARITABLE PURPOSES, UNDER TITLE 7-6 OF THE RHODE ISLAND GENERAL LAWS, TO RAISE FUNDS TO PROVIDE CARE FOR THE ANIMALS AT THE SCITUATE, RHODE ISLAND ANIMAL SHELTER, TO PROTECT THE WELFARE OF THE ANIMALS HOUSED AT THE SHELTER, AND TO FACILITATE IMPROVEMENTS TO THE MUNICIPAL SHELTER STRUCTURE AND EXTERNAL GROUNDS, WITH THE PERMISSION OF THE TOWN OF SCITUATE.

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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JOHANNA SPARLING	484 FIELD HILL ROAD CLAYVILLE, RI 02815 US
VICE PRESIDENT	PETER D SPARLING	484 FIELD HILL RD CLAYVILLE, RI 02815 USA
DIRECTOR	JOHANNA SPARLING	484 FIELD HILL RD. CLAYVILLE, RI 02815 USA
DIRECTOR	PETER D. SPARLING	484 FIELD HILL RD. CLAYVILLE, RI 02815 USA
DIRECTOR	JUSTINE MARIE MOREAU	6353 LAMPKINS BRIDGE RD. COLLEGE GROVE, TN 37046 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

JOHANNA SPARLING 484 FIELD HILL ROAD CLAYVILLE , RI 02815

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

Signed this 26 Day of January, 2024 at 5:01:03 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 JOHANNA SPARLING  
Signature of Authorized Person

Form No. 631  
Revised 09/07