



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. 000589309

2. Name of Corporation Universal Promise

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: PO BOX 128

City or Town: NEWPORT State: RI Zip: 02840 Country: USA

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

CHARITABLE RELIGIOUS EDUCATIONAL AND SCIENTIFIC PURPOSES

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
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CHAIR	RISA WEINRIT	24 OAK HILL ROAD NEEDHAM, MA 02492 USA
SECRETARY	ALEX HILL	5586 S. EMPORIA CIRCLE GREENWOOD VILLAGE, CO 80111 USA
TREASURER	KIM FINNERTY	5100 AVIA CIRCLE HENRICO, VA 23233 USA
DIRECTOR	MEG PICKERING	1614 EAST AVENUE MCLEAN, VA 22101 USA
DIRECTOR	MARTHA T CUMMINGS	340 GLEN ROAD PORTSMOUTH, RI 02871 USA
DIRECTOR	SIYABULELA RABIE	21977 GOVERN MBEKI ROAD MANDELA PARK, KHAYELITSHA, 7784 ZAF
DIRECTOR	MICHAEL FONTAINE	145 PROSPECT FARM ROAD PORTSMOUTH, RI 02871 USA
DIRECTOR	CHARLIE JOSEPHS	7 NIXON ROAD PERRIDGEVALE, PORT ELIZABETH, 6001 ZAF
DIRECTOR	ZUKISWA MBULI	5 CARRADALE PERCY OWEN STREET SUMMERSTRAND, PORT ELIZABETH, 6091 ZAF

**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**

MARTHA T. CUMMINGS 340 GLEN ROAD PORTSMOUTH , RI 02871

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

Signed this 30 Day of January, 2024 at 9:20:45 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 MARTHA T CUMMINGS
Signature of Authorized Person

Form No. 631
Revised 09/07