



**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. 000093247

2. Name of Corporation RIWA, INC.

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

813319

4. Principal Office Address

No. and Street: 447 SAW MILL ROAD

City or Town: NORTH SCITUATE

State: RI

Zip: 02857

Country: USA

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

TO PROVIDE A SUPPORTIVE SOCIAL, RECREATIONAL AND EDUCATIONAL NETWORK FOR WOMEN WHO HAVE CHOSEN A SELF-DEFINED GAY OR LESBIAN LIFESTYLE.

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	DONNA-MARIE FRAPPIER MS.	136 EAST HILL DR. CRANSTON, RI 02920 US
TREASURER	LYNN FURNEY	447 SAW MILL ROAD NORTH SCITUATE, RI 02857 USA
SECRETARY	LISA ABREAU	10 GROVE ST. ATTLEBORO, MA 02703 USA
VICE PRESIDENT	LESLIE BAKER	24 LANDAU ROAD PLAINVILLE, MA 02762 USA
DIRECTOR	JENNIFER HEALD	20 JOHNSON ST WESTPORT, MA 02790 MA
DIRECTOR	LISA KOULIBALY	20 BATCHELLER AVE. CRANSTON, RI 02920 USA
DIRECTOR	SHARON CAVALLORO MS.	48 LANE 4 WARWICK, RI 02888 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

LYNN FURNEY 447 SAW MILL ROAD NORTH SCITUATE , RI 02857

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

Signed this 20 Day of March, 2024 at 4:03:42 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 LYNN M. FURNEY
Signature of Authorized Person

Form No. 631
Revised 09/07