RI SOS Filing Number: 202449435210 Date: 3/26/2024 4:29:00 PM



# 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. <u>001481131</u>
- 2. Name of Corporation Holy Family Home for Mothers and Children
- 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 <u>click here.</u>

NAICS Code

<u>813110</u>

#### 4. Principal Office Address

No. and Street: 979 BRANCH AVENUE

City or Town: NORTH PROVIDENCE State: RI Zip: 02904 Country: USA

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

TO PROVIDE SHELTER AND SERVICES TO WOMAN AND THEIR CHILDREN ORGANIZED EXCLUSIVELY CHARITABLE RELIGIOUS EDUCATIONAL AND SCIENTIFIC PURPOSES INCLUDING FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS DESCRIBED UNDER SECTION 501(C)(3) IRS CODE

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
DIRECTOR	FR. EDWARD CARDENTE	5 GIBBS STREET NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	JINA N. PETRARCA	2 GRANDSTAND DRIVE LINCOLN, RI 02865 USA
DIRECTOR	JOHN H. PETRARCA	350 SILVER SPRING STREET PROVIDENCE, RI 02904 USA
DIRECTOR	VINCENT J. MESOLELLA	27 PADDOCK DRIVE LINCOLN, RI 02865 USA
DIRECTOR	DONNA OTTAVIANO	979 BRANCH AVENUE NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	JIM ACETO	979 BRANCH AVENUE NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	JOSEPH MONTALBANO	979 BRANCH AVENUE NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	DR. DOREEN CIANCAGLINI	1169 MINERAL SPRING AVENUE NORTH PROVIDENCE, RI 02904 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

JINA PETRARCA-KARAMPEISOS ESQ. 330 SILVER SPRING STREET PROVIDENCE, RI 02904

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 March, 2024 at 4:31:51 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 FR. EDWARD CARDENTE

Signature of Authorized Person

Form No. 631 Revised 09/07

© 2007 - 2024 State of Rhode Island All Rights Reserved