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. 001763422

2. Name of Corporation RP4 Foundation, 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: 615 MAUREEN CIRCLE
City or Town: MAPLEVILLE State: RI Zip: 02839 Country: USA

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

EXCLUSIVELY FOR CHARITABLE EDUCATION AND SCIENTIFIC PURPOSES AS DESCRIBED IN
SECTION 501C3 OF THE INTERNAL REVENUE CODE. PROMOTING THE SOCIAL WELFARE AND
GENERAL WELL-BEING OF CANCER PATIENTS AND THEIR FAMILIES

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
INCORPORATOR	STUART D. PEARSON	615 MAUREEN CIRCLE MAPLEVILLE, RI 02839 USA
DIRECTOR	STUART D. PEARSON	615 MAUREEN CIRCLE MAPLEVILLE, RI 02839 USA
DIRECTOR	HEATHER A. FARRELL	2292 VICTORY CIRCLE HARRISVILLE, RI 02830 USA
DIRECTOR	MATTHEW D. PEARSON	92A JOHNSON ROAD FOSTER, RI 02825 USA
DIRECTOR	RITA A. WOODCOCK	49 HELEN AVENUE COVENTRY, RI 02816 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

STUART D. PEARSON 615 MAUREEN CIRCLE MAPLEVILLE , RI 02839

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

Signed this 29 Day of April, 2024 at 8:38:23 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 RITA A WOODCOCK
Signature of Authorized Person

Form No. 631
Revised 09/07