RI SOS Filing Number: 202455371230 Date: 6/7/2024 3:10:00 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>001749194</u>
- 2. Name of Corporation NCBR Charities
- 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>624190</u>

#### 4. Principal Office Address

No. and Street: 26 VALLEY ROAD

City or Town: MIDDLETOWN State: RI Zip: 02842 Country: USA

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

TO PROVIDE CHARITABLE RELIEF TO NEWPORT COUNTY RESIDENTS BY PROVIDING

MONETARY SUPPORT, NECESSARY SUPPLIES, SCHOLARSHIPS AND PROVIDING SUPPORT TO

NONPROFIT ORGANIZATIONS TO BENEFIT NEWPORT COUNTY.

#### 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	MARK M. THAYER	130 BELLEVUE AVENUE NEWPORT, RI 02840 USA
DIRECTOR	DANIELE MONTAFUSCO	LILA DELMAN COMPASS REALTY, 3 MEMORIAL BLVD, SUITE 3540 NEWPORT, RI 02840 USA
DIRECTOR	KIMBERLY FLEMING	37 BELLEVUE AVENUE NEWPORT, RI 02840 USA
DIRECTOR	MEREDITH LEBLANC	294 VALLEY ROAD MIDDLETOWN, RI 02840 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

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

Signed this 7 Day of June, 2024 at 3:10:49 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 **HANNAH HODGSON**

Signature of Authorized Person

Form No. 631 Revised 09/07

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