RI SOS Filing Number: 202458654970 Date: 8/8/2024 2:19:00 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**: <u>2024</u>

- 1. Corporate ID No. 001760905
- 2. Name of Corporation Cabo Verdeans United Foundation
- 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

813211

#### 4. Principal Office Address

No. and Street: 3 JARED COURT

City or Town: <u>SOUTH WINDSOR</u> State: <u>CT</u> Zip: <u>06074</u> Country: <u>USA</u>

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

CABO VERDEANS UNITED FOUNDATION IS A CHARITABLE ORGANIZATION DEDICATED TO

THE PEOPLE OF CABO VERDE ISLAND, TO HELP THE CHILDREN AND YOUTH OF THE CABO

VERDE ISLANDS, AS WELL AS THEIR FAMILIES. TO ENGAGE IN PHILANTHROPIC ACTIVITIES TO FOSTER AND ENRICH THE CULTURAL, SOCIAL AND ATHLETIC EXPERIENCES OF CHILDREN, YOUTH OF CABO VERDE ISLANDS AND THEIR FAMILIES;

AND TO CARRY ON ANY OTHER ACTIVITY THAT MAY BE LAWFULLY CARRIED ON BY A

ORGANIZATION FORMED UNDER THE RHODE ISLAND NON-PROFIT ORGANIZATION ACT AS

MAY BE IN EFFECT FROM TIME TO TIME.

## 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	EUGENIA C LOMBA	3 JARED COURT SOUTH WINDSOR, CT 06074 USA
DIRECTOR	MATILDE C ADAMS	85 ALLERTON AVENUE EAST PROVIDENCE, RI 02914 USA
DIRECTOR	JOHN J LOMBA	3 JARED COURT SOUTH WINDSOR, CT 06074 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

MATILDE ADAMS 85 ALLERTON AVE EAST PROVIDENCE, RI 02914

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

**Signed this 8 Day of August, 2024 at 2:19:50 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 JOHN J LOMBA

Signature of Authorized Person

Form No. 631 Revised 09/07

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