



**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 2025:** 2025

**1. Corporate ID No.** 000125965

**2. Name of Corporation** STAND UP FOR ANIMALS

**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

812910

**4. Principal Office Address**

No. and Street: 33 LARRY HIRSCH LANE  
SUITE B

City or Town: WESTERLY State: RI Zip: 02891 Country: USA

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

TO SUPPORT THE NEEDS OF ANIMALS TO PROMOTE THE HEALTH AND WELFARE  
OF ABANDONED OF LOST PETS AND TO PROVIDE COMMUNITY ASSITANCE  
INCLUDING EDUCATION

**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.**

| <b>Title</b>   | <b>Individual Name</b><br>First, Middle, Last, Suffix | <b>Address</b><br>Address, City or Town, State, Zip Code, Country |
|----------------|-------------------------------------------------------|-------------------------------------------------------------------|
| PRESIDENT      | CARYN MITCHELL                                        | 240 WOODVILLE ROAD<br>ASHAWAY, RI 02804 USA                       |
| TREASURER      | LINDA WINFREY                                         | 14 TONKAWA AVENUE<br>WESTERLY, RI 02891 USA                       |
| SECRETARY      | BARBARA MARTIN                                        | 33 LARRY HIRSCH LN<br>WESTERLY, RI 02891 USA                      |
| VICE PRESIDENT | GAIL QUATTROMANI                                      | 19 HISCOX ROAD<br>WESTERLY, RI 02891 USA                          |
| DIRECTOR       | JEFFREY J FRENETTE                                    | 33 SUMMER STREET<br>WESTERLY, RI 02891 USA                        |
| DIRECTOR       | CAROL L. ALMEDEO                                      | 16 NEWBURY DRIVE<br>WESTERLY, RI 02891 USA                        |
| DIRECTOR       | ALBERTO DEJESUS                                       | 72 WARD AVENUE<br>WESTERLY, RI 02891 USA                          |
| DIRECTOR       | KURT HARRINGTON                                       | 33 LARRY HIRSCH LN<br>WESTERLY, RI 02891 USA                      |
| DIRECTOR       | BARBARA MARTIN                                        | 33 LARRY HIRSCH LN<br>WESTERLY, RI 02891 USA                      |
| DIRECTOR       | DEB TORRACA                                           | 33 LARRY HIRSCH LN<br>WESTERLY, RI 02891 USA                      |
| DIRECTOR       | TAMMIE VOCATURA                                       | 33 LARRY HIRSCH LN<br>WESTERLY, RI 02891 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**

PETER L. LEWISS, ESQ. 79 FRANKLIN STREET WESTERLY , RI 02891

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

**Signed this 6 Day of March, 2025 at 2:20:56 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 CARYN MITCHELL  
Signature of Authorized Person

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