State of Rhode Island
Department of State - Business Services Division

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Annual Report for the year: 2022
Non-Profit Corporation

→ Filing period: February 1 - May 1
→ Filing Fee: $20.00
→ Penalty: Additional $25.00 fee if form is not filed by May 31

2025 FEB 4 AM 12

1. Entity ID Number	2. Exact name of the Corporation
000794424	Hearts With Hope, Inc.
3. State of Incorporation: RI	5. Brief description of the character of business conducted in Rhode Island: To raise money for the benefit of Woonsocket High School Alumni and/or their immediate families who have suffered a catastrophic life event.
4. NAICS Code: 813219	

6. Principal Office Address	City	State	Zip
118 Crestwood Court	Cumberland	RI	02864

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

	President	Vice-President	Secretary	Treasurer
Name	Katherine Heroux	Jennifer Wholey	VACANT	Cheryl Pincince
Street Address	147 Louise Street	28 Warren Avenue		510 East Central Street
City	Woonsocket	Johnston		Franklin
State	RI	RI		MA
Zip	02895	02919		02038

8. List ALL directors (names and addresses). RI Corporations **MUST** list at least **THREE** directors. — Check the box to indicate an attachment ☐

	Director	Director	Director	Director
Name	Brian K Beausoleil	Patrick Daignault	Cherie Stabile	
Street Address	12 Federal Street	1699 Victory Highway	302 Burnside Avenue	
City	Blackstone	Glendale	Woonsocket	
State	MA	RI	RI	
Zip	01504	02826	02895	

9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

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

Name of Officer/Authorized Representative: **Cheryl-Ann Pincince**

Date: **1/13/2025**

Signature of Officer/Authorized Representative

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BY IJC7R

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FORM 631- Revised: 12/2023