



**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. 001735308

2. Name of Corporation Anchored In Hope Ministry

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

813100

4. Principal Office Address

No. and Street: P.O. BOX 113936

City or Town: NORTH PROVIDENCE State: RI Zip: 02911 Country: USA

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

WE HAVE A HEART TO HELP PEOPLE IN NEED. WE ARE HERE TO HELP THOSE IN NEED AND LOVE PEOPLE LIKE JESUS DID. OUR PURPOSE IS TO HEAL THE WORLD ONE PRAYER AT A TIME AND MINISTER HOPE TO THOSE WE COME IN CONTACT WITH BY PROVIDING FOOD, CLOTHING AND SHELTER TO THOSE IN NEED. WE ENCOURAGE PEOPLE THAT A LIFE OF HOPE IS A LIFE COMPLETELY SURRENDERED TO CHRIST.

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
SECRETARY	SHARON SMITH	197 WILLARD AVE. SEEKONK, MA 02771 USA
DIRECTOR	HOPE BOURNE	242 WATERMAN AVENUE NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	SHARON SMITH	197 WILLARD AVE SEEKONK, MA 02771 USA
DIRECTOR	FRANK JOYAL	309 AQUEDUCT RD CRANSTON, RI 02910 US

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

HOPE BOURNE 242 WATERMAN AVENUE #A-13 NORTH PROVIDENCE , RI 02911

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

Signed this 23 Day of April, 2025 at 7:06:43 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 HOPE R. BOURNE
Signature of Authorized Person

Form No. 631
Revised 09/07

© 2007 - 2025 State of Rhode Island
All Rights Reserved