



**State of Rhode Island  
Office of the Secretary of State**

No Fee

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Domestic Non-Profit  
Annual Report - Amended**

Filing Period: February 1 - May 1

*In accordance with R.I.G.L. 7-1.2-1501(e), 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.*

**This form is only to be used to amend the current annual report on file with this office.**

**ANNUAL REPORT YEAR:** 2025

**1. Corporate ID No.** 001763139

**2. Name of Corporation** Collectiva

**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  
813212

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 116 MAIN STREET  
#6

City or Town: WAKEFIELD State: RI Zip: 02879 Country: USA

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

COLLECTIVA IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, EDUCATIONAL, AND SCIENTIFIC PURPOSES, INCLUDING, FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS DESCRIBED UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE

FEDERAL TAX CODE. THE SPECIFIC PURPOSE OF COLLECTIVA IS TO ASSIST BIPOC AND LGBTQ+ COMMUNITIES WITH ACCESS TO MENTAL HEALTH THERAPY, PROVIDE NEW SOCIAL WORK GRADUATES WITH RESOURCES TO ADVANCE THEIR CAREERS, AND CREATE PEER SUPPORT OPPORTUNITIES FOR MENTAL HEALTH PROVIDERS.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3).  
R.I.G.L.  
7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
DIRECTOR	MATTHEA MARQUART	90 LA SALLE ST APT 11E NEW YORK, NY 10027 USA
DIRECTOR	ROBIN SEMPERVIRENS	530 W 148TH ST APT 2 NEW YORK, NY 10031 USA
DIRECTOR	AMELIA ORTEGA	1801 MATUNUCK SCHOOLHOUSE ROAD #5 WAKEFIELD, RI 02879 USA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

AMELIA ORTEGA 116 MAIN STREET, #6 WAKEFIELD , RI 02879

Signed this 25 Day of April, 2025 at 4:12:07 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 AMELIA ORTEGA  
Signature of Authorized Person

Form No. 631  
Revised 09/07



State of Rhode Island

**Department of State | Office of the Secretary of State**

**Gregg M. Amore**, *Secretary of State*

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,  
  
hereby certify that this document, duly executed in accordance with the provisions  
  
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this  
  
office on this day:

April 25, 2025 04:11 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is fluid and cursive, with the first letters of each name being capitalized.

Gregg M. Amore  
*Secretary of State*

