



**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. 001782218

2. Name of Corporation Warrior One Project

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

813319

4. Principal Office Address

No. and Street: 165 BOON STREET

City or Town: NARRAGANSETT

State: RI

Zip: 02882

Country: USA

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

WARRIOR ONE PROJECT IS A NON-PROFIT ORGANIZATION DEDICATED TO CENTERING INDIGENOUS WOMEN IN THE CIRCLE OF WELLNESS. OUR GOAL IS TO BREAK DOWN LIMITING BELIEFS AND CULTURAL BARRIERS TO WELLBEING BY HEALING GENERATIONS OF HISTORICAL AND CELLULAR TRAUMA THROUGH HOLISTIC WELLNESS, AND THE PRACTICES OF YOGA, MEDITATION, AND NUTRITION. WHILE WE CENTER INDIGENOUS WOMEN, WE WELCOME ALL.

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
INCORPORATOR	SYLVIA CAROLLE SPEARS	165 BOON STREET NARRAGANSETT, RI 02882 USA
OTHER OFFICER	SYLVIA C SPEARS	165 BOON STREET NARRAGANSETT, RI 02882 USA
DIRECTOR	SYLVIA CAROLLE SPEARS	165 BOON STREET NARRAGANSETT, RI 02882 USA
DIRECTOR	NICOLE MICHELLE MINETTI	165 A BOON STREET NARRAGANSETT, RI 02882 USA
DIRECTOR	DAVID LAWRENCE POCKETT JR	19 EMMA OAKLEY WAY MASHPEE, MA 02649 USA
DIRECTOR	ASA JOHN PETERS	315 MONOMOSCOY ROAD MASHPEE, MA 02649 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

SYLVIA C. SPEARS 165 BOON STREET NARRAGANSETT , RI 02882

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

Signed this 26 Day of April, 2025 at 4:02:17 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 SYLVIA SPEARS
Signature of Authorized Person

Form No. 631
Revised 09/07

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