RI SOS Filing Number: 202571424960 Date: 4/26/2025 4:12:00 PM



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**: <u>2025</u>

- 1. Corporate ID No. 001672618
- **2.** Name of Corporation Charles Annette Redeemed Empowerment (C.A.R.E.) Scholarship Foundation
- 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 <u>click here.</u>

NAICS Code

611310

4. Principal Office Address

No. and Street: <u>C/O LATOYA MOSELEY</u>

35 RED CEDAR LANE

City or Town: NORTH PROVIDENCE State: RI Zip: 02904 Country: USA

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

OUR MISSION IS TO INSPIRE EMPOWER AND SUPPORT POST SECONDARY HIGH SCHOOL STUDENTS WHO DEMONSTRATE DEDICATION TO LEADERSHIP AND DEDICATION TO COMMUNITY THAT WOULD ORFINARILY NOT QUALIFY FOR A SCHOLARSHIP DUE TO NOT HAVING ALL AS OR AS AND BS THE CARE SCHOLARSHIP FOUNDATION IS IN HONOR OF MY CARES CHARLES AND ANNETTE JACKSON WHO BOTH DIED FROM CANCER

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
CEO	MARY E JACKSON	36 SAMPSON AVENUE NORTH PROVIDENCE, RI 02911 USA
CEO	MARY E JACKSON	36 SAMPSON AVENUE NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	MARY E JACKSON	36 SAMPSON AVENUE NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	LATOYA MOSELEY	35 RED CEDAR LANE NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	DR. RUDOLPH MOSELEY	35 RED CEDAR LANE NORTH PROVIDENCE, RI 02904 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

MARY JACKSON 36 SAMPSON AVENUE 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 26 Day of April, 2025 at 4:15:14 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 MARY JACKSON

Signature of Authorized Person

Form No. 631 Revised 09/07

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