	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			
7630	(401) 222-3040			
Non-Profit Corp Annual Report Filing Period: Febr				
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. 001711867				
2. Name of Corporation The Natalie and Daniel Perlman Charitable Foundation				
3. State of Incorporation				
State: <u>RI</u>				
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				
<u>813311</u>				
4. Principal Office Address				
No. and Street:	375 COMMERCE PARK ROAD			
City or Town:	<u>NORTH KINGSTOWN</u> State: <u>RI</u> Zip: <u>02852</u> Coun	try: <u>USA</u>		
5. Brief Description of the Character of the Affairs Conducted in Rhode Island				
TO PROMOTE CHARITABLE PURPOSES, INCLUDING, BUT NOT LIMITED TO,				
PROMOTING JUSTICE AND CIVIL LIBERTIES, PROTECTION AND PROMOTION OF				
ANIMALS AND ANIMAL RIGHTS, AND PROMOTION OF ANIMAL AND HUMAN SERVICES FOR ANIMALS AND HUMANS IN NEED, INCLUDING FOOD AND				
CEDVICES FOR	D ANIMAT C AND HIMANC IN NEED INCITIONC ECOD AND			
	<u>R ANIMALS AND HUMANS IN NEED, INCLUDING FOOD AND</u> ICATION LITERACY AND ANY OTHER CHARITABLE OR			
SHELTER, EDU	<u>R ANIMALS AND HUMANS IN NEED, INCLUDING FOOD AND</u> JCATION, LITERACY, AND ANY OTHER CHARITABLE OR L PURPOSES PERMITTED BY LAW.			

## 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
DIRECTOR	DANIEL PERLMAN	375 COMMERCE PARK ROAD NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	NATALIE PERLMAN	375 COMMERCE PARK ROAD NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	JOHN CONFORTI	375 COMMERCE PARK ROAD NORTH KINGSTOWN, RI 02852 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

TRACY C. BARAN, ESQ. 375 COMMERCE PARK ROAD NORTH KINGSTOWN , RI 02852

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

**Signed this 5 Day of May, 2025 at 9:54:53 AM 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 DANIEL PERLMAN, DIRECTOR

Signature of Authorized Person

Form No. 631 Revised 09/07

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