



**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. 001763139

2. Name of Corporation Collectiva

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

813212

4. Principal Office Address

No. and Street: 116 MAIN STREET

#6

City or Town: WAKEFIELD

State: RI

Zip: 02879

Country: USA

5. Brief Description of the Character of the Affairs 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.

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
PRESIDENT	AMELIA ORTEGA	1801 MATUNUCK SCHOOLHOUSE #5 ROAD WAKEFIELD, RI 02879 USA
SECRETARY	VERA BASFORD	182 MAIN ST. SUITE #304 NORTHAMPTON, MA 01060 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
DIRECTOR	MATTHEA MARQUART	90 LA SALLE ST APT 11E NEW YORK, NY 10027 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

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

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

Signed this 20 Day of May, 2025 at 1:41:38 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