

**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.** 001742733**2. Name of Corporation** Liberian School for Needy Children, Inc.**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

813219**4. Principal Office Address**No. and Street: 206 WOOD HILL RDCity or Town: NARRAGANSETTState: RIZip: 02882Country: USA**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**501(C)(3) TO SUPPORT THE EDUCATION AND WELL BEING OF NEEDY CHILDREN**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	PAUL SARDELLI	206 WOOD HILL ROAD NARRAGANSETT, RI 02882 USA
OTHER OFFICER	PAUL SARDELLI	97 INKBERRY TRAIL NARRAGANSETT, RI 02882 UNI
DIRECTOR	PAUL SARDELLI	206 WOOD HILL ROAD NARRAGANSETT, RI 02882 USA
DIRECTOR	FATHER CRAIG SWAN	191 KINGSRIDE ROAD SOUTH KINGSTOWN, RI 02879 USA
DIRECTOR	PAUL SARDELLI	97 INKBERRY TRAIL NARRAGANSETT, RI 02882 USA
DIRECTOR	MARCIA ROBINSON	97 INKBERRY TRAIL NARRAGANSETT, RI 02882 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

HAWAZOE ROBINSON 97 INKBERRY TRAIL 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 3 Day of June, 2025 at 10:09:13 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 PAUL SARDELLI
Signature of Authorized Person

Form No. 631
Revised 09/07

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