



**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:** 2024

**1. Corporate ID No.** 001773782

**2. Name of Corporation** The Rhode Island Education Center for H.O.P.E- Healthcare Opportunities, Programs, and Experiences

**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: 75 COMMERCE DR

City or Town: WARWICK

State: RI

Zip: 02886-2429

Country: USA

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

THE PURPOSE OF THIS CORPORATION IS TO EDUCATE STUDENTS GOING INTO THE HEALTHCARE FIELD. THIS EDUCATION CENTER WOULD HELP FUND EDUCATION OPPORTUNITIES FOR STUDENTS TO COMPLETE OUR ALLIED HEALTH AND EMERGENCY MEDICAL SERVICES CLASSES AND BECOME CERTIFIED WITH PATIENTS IN FACILITIES

AROUND RHODE ISLAND. THESE STUDENTS WOULD ALSO RECEIVE ASSISTANCE WITH JOB PLACEMENTS AFTER THEY COMPLETE THE PROGRAM OF THEIR CHOICE.

**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.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	ALBERT PETERSON	28 FOREST VIEW DR NORTH PROVIDENCE, RI 02904 UNI
INCORPORATOR	ALBERT PETERSON	28 FORREST VIEW DRIVE N PROVIDENCE, RI 02904 USA
DIRECTOR	SHELBY NELSON	79 PALACE AVE WARWICK, RI 02886 USA
DIRECTOR	STEVEN ARDENTE	299 CARPENTER STREET PROVIDENCE, RI 02909 USA
DIRECTOR	ALBERT PETERSON	28 FORREST VIEW DRIVE NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	LUCRECIA ARDENTE	43 BULLOCKS POINT ROAD EAST PROVIDENCE, RI 02905 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**

ALBERT PETERSON 150 NIAN TIC AVE PROVIDENCE , RI 02907

**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 August, 2025 at 2:24:25 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 ALBERT PETERSON  
Signature of Authorized Person

Form No. 631  
Revised 09/07