



**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

**Foreign Non-Profit
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: 2022

1. Corporate ID No. 001706151

2. Name of Corporation Head Strong Project Inc.

3. State of Incorporation

State: DE

ARTICLE III

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

4. Principal Office Address

No. and Street: C/O HSP, 530 7TH AVE, SUITE 1406

City or Town: NEW YORK

State: NY Zip: 10018 Country: USA

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

TO OPERATE A CHARITABLE ORGANIZATION THAT WILL PROVIDE MENTAL HEALTH CARE FOR WAR VETERANS

6. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
VICE CHAIRMAN, DIRECTOR	DAVE PETRUCCO	C/O HSP, 530 7TH AVE, SUITE 1406 NEW YORK, NY 10018 USA
EXECUTIVE DIRECTOR	JAMES D MCDONOUGH	C/O HSP, 530 7TH AVE, SUITE 1406

		NEW YORK, NY 10018 USA
DEPUTY DIRECTOR	LOIS SLUBOWSKI	C/O HSP, 530 7TH AVE, SUITE 1406 NEW YORK, NY 10018 US
BOARD CHAIR, DIRECTOR	PAUL CASEY	C/O HSP, 530 7TH AVE, SUITE 1406 NEW YORK, NY 10018 USA
DIRECTOR	ALBERT RABIL	C/O HSP, 530 7TH AVE, SUITE 1406 NEW YORK, NY 10018 USA
DIRECTOR	BILL WOLFE	C/O HSP, 530 7TH AVE, SUITE 1406 NEW YORK, NY 10018 USA
DIRECTOR	DARLAN MONTERISI	C/O HSP, 530 7TH AVE, SUITE 1406 NEW YORK, NY 10018 USA
DIRECTOR	LIBBY LEIST	C/O HSP, 530 7TH AVE, SUITE 1406 NEW YORK, NY 10018 USA
DIRECTOR	LINDA SINGH	C/O HSP, 530 7TH AVE, SUITE 1406 NEW YORK, NY 10018 USA
DIRECTOR	PETER WESTMEYER	C/O HSP, 530 7TH AVE, SUITE 1406 NEW YORK, NY 10018 USA
DIRECTOR	RYAN SPARKS	C/O HSP, 530 7TH AVE, SUITE 1406 NEW YORK, NY 10018 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**

REGISTERED AGENTS INC. 47 WOOD AVE. STE 2 BARRINGTON , RI 02806

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

Signed this 13 Day of April, 2022 at 9:30:38 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 ZIVILE KUNDEL, BOOKKEEPER

Signature of Authorized Person

Form No. 631
Revised 09/07

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