



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2022
Corporation

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

RECEIVED
 R.I. DEPT. OF STATE
 BUS SVCS DIV
 2022 AUG - 3 A 11 59 AM

1. Entity ID Number 001728838		2. Exact name of the Corporation RISE FINANCIAL CORP			
3. Principal Office Address 96 CEDAR GROVE DRIVE			City EXETER	State RI	Zip 02822
4. NAICS Code 523930		6. Brief description of the character of business conducted in Rhode Island RIA			
5. State of Incorporation RHODE ISLAND					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name CAROLYN SIGMAN			Vice-President Name		
Street Address 96 CEDAR GROVE DRIVE			Street Address		
City EXETER	State RI	Zip 02822	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		100		COMMON STOCK	\$ 1
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee. <i>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</i>					
Name of Authorized Representative CAROLYN SIGMAN				Date AUG 3rd 2022	
Signature of Authorized Representative 				FILED 1149	

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615

AUG 03 2022
BY MB AG-V9S