



**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:** 2023

**1. Corporate ID No.** 000030469

**2. Name of Corporation** Meals on Wheels of RI, Inc.

**3. State of Incorporation**

State: RI

**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  
624210

**4. Principal Office Address**

No. and Street: 70 BATH STREET  
City or Town: PROVIDENCE State: RI Zip: 02908 Country: USA

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

TO DELIVER MEALS AND PROVIDE OTHER SERVICES TO THE HOMEBOUND ELDERLY IN THE STATE OF RI

**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	Address
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
TREASURER	CHRISTINA PITNEY	125 HAMILTON DR EAST GREENWHICH, RI 02818 USA
CHAIR	COREY MCCARTY	75 TOMAHAWK TRAIL CRANSTON, RI 02921 USA
EXECUTIVE DIRECTOR	MEGHAN GRADY	10 BRIARWOOD DR BARRINGTON, RI 02806 USA
DIRECTOR	JAMES JOLY	10 QUEEN ST, #4 EAST GREENWICH, RI 02818 USA
DIRECTOR	STEPHANIE MCCAFFREY	20 LINCOLN AVE COVENTRY, RI 02816 USA
DIRECTOR	KEVIN MILLONZI	25 BELKNAP FARM DR JOHNSTON, RI 02919 USA
DIRECTOR	JOE ROTELLA	27 COLONY DRIVE JOHNSTON, RI 02919 USA
DIRECTOR	GREGORY SMOLAN	1 SHELTER LANE CUMBERLAND, RI 02864 USA
DIRECTOR	PHANIDA PHIVILAY	42 ROGER WILLIAMS DR JOHNSTON, RI 02919 USA
DIRECTOR	EDWARD FISCHER	32 CEDAR AVE BARRINGTON, RI 02806 USA
DIRECTOR	HELEN MACDONALD	188 BENEFIT STREET, APT. 5 PROVIDENCE, RI 02903 USA
DIRECTOR	LAUREN AMARAL	5 LEDGEMONT LANE DARTMOUTH, MA 02748 USA
DIRECTOR	KRISTIN MATSKO	9 DORY ROAD WARWICK, RI 02886 USA
DIRECTOR	MEGAN HERNE	600 E. GREENWICH AVE WEST WARWICK, RI 02893 USA
DIRECTOR	ELIZABETH PHILLIPS	1370 WARWICK AVE WARWICK, RI 02888 USA
DIRECTOR	DR. MARYLOU BUYSE	59 GREENLAKE DR GREENVILLE, RI 02828 USA
DIRECTOR	JOCELYN NACCI	15 HERITAGE DR CUMBERLAND, RI 02865 USA
DIRECTOR	JACLYN COTTER	197 CARPENTER ST PROVIDENCE, RI 02903 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**

FRANK J. MANNI, ESQ. 1405 PLAINFIELD ST JOHNSTON , RI 02919

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

**Signed this 7 Day of February, 2023 at 11:12:30 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 MEGHAN GRADY  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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