	State of Rhode Office of the Secreta		Fee: \$20.00	
	Division Of Busines	s Services		
	148 W. River S			
1/26	Providence RI 029			
1030	(401) 222-30	40		
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 - ENTER THE CURRENT YEAR 2024: 2024				
1. Corporate ID No. 000538790				
2. Name of Corporation The Hometown Foundation, Inc.				
3. State of Incorporation				
State: <u>CT</u>				
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 <u>click here.</u>				
NAICS Code				
<u>624190</u>				
4. Principal Office Address				
No. and Street: <u>275 SCH</u>	OOLHOUSE RD			
City or Town: <u>CHESHIE</u>	<u>RE</u> Sta	te: <u>CT</u> Zip: <u>06410</u>	Country: <u>USA</u>	
5. Brief Description of the Character of the Affairs Conducted in Rhode Island				
SERVE AS A CATALYST FOR, AND TO ORGANIZE AND FINALLY SUPPORT VARIOUS				
COMMUNITY-BASED CHARITABLE ACTIVITIES				
6. Names and Addresses of the Officers and Directors:				
All officers and directors must be listed.				
Title	Individual Name First, Middle, Last, Suffix	Addr Address, City or Town, S		
			i	

PRESIDENT	MICHAEL A BOZZUTO	808 HARBOUR ISLES CT NORTH PALM BEACH, FL 33410 USA
VICE PRESIDENT	JOSEPH CALVANESE	550 MULBERRY STREET PLANTSVILLE, CT 06479 USA
TREASURER	BERT CONDREN	113 PIERSON DRIVE WALLINGFORD, CT 06419 USA
SECRETARY	JULIANA M ESPOSITO	15 HOMESTEAD PL CHESHIRE, CT 06410 USA
DIRECTOR	DANIEL DESANTIS	12 SADIE CIRCLE EASTON, MA 02375 USA
DIRECTOR	DOMINIC PAPA	772 LAGOON DRIVE NORTH PALM BEACH, FL 33408 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

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST PROVIDENCE , RI 02914

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

**Signed this 1 Day of March, 2024 at 9:37:49 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 JULIANA M ESPOSITO

Signature of Authorized Person

Form No. 631 Revised 09/07

© 2007 - 2024 State of Rhode Island All Rights Reserved