



**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 2024: 2024

1. Corporate ID No. 001738249

2. Name of Corporation Wilderness Ways Foundation

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
813211

4. Principal Office Address

No. and Street: 940 QUAKER LN
APT 505

City or Town: WARWICK State: RI Zip: 02818 Country: USA

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

TO PROMOTE TRANSFORMATIONAL OUTDOOR EXPERIENCES

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
-------	-----------------	---------

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	JAMES A. HOPKINS	117 PINE GLEN DRIVE EAST GREENWICH, RI 02818 USA
TREASURER	HELEN J. GAUDETTE	940 QUAKER LN WARWICK, RI 02818 USA
SECRETARY	PAUL SCHNIEDER	PO BOX 1044 KENT, WA 98035 USA
DIRECTOR	CHRISTINE GEEDING	54 HUBINGER STREET FL1 NEW HAVEN, CT 06511 USA
DIRECTOR	CHRISTOFF M POLAGNOLI	76 BURBANK STREET CRANSTON, RI 02910 USA
DIRECTOR	AARON STOCKWELL	4 LINCOLN PLACE NATICK, MA 01769 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

HELEN J. GAUDETTE 940 QUAKER LANE UNIT 505 WARWICK , RI 02818

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

Signed this 28 Day of April, 2024 at 2:45:11 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 HELEN J. GAUDETTE
Signature of Authorized Person

Form No. 631
Revised 09/07

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