RI SOS Filing Number: 202453380810 Date: 4/30/2024 4:16:00 PM



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**: <u>2024</u>

- **1. Corporate ID No.** 001716871
- 2. Name of Corporation New England Care Packages
- 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 <u>click here.</u>

NAICS Code

<u>813319</u>

4. Principal Office Address

No. and Street: 22 PINE TOP ROAD

City or Town: BARRINGTON State: RI Zip: 02806 Country: USA

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

THE CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, EDUCATIONAL, AND SCIENTIFIC PURPOSES AS SPECIFIED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, INCLUDING FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, OR THE CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE. THE SPECIFIC PURPOSE OF THE CORPORATION IS TO ENGAGE IN PUBLIC ADVOCACY IN SUPPORT OF THE DEVELOPMENT OF THE SO-CALLED FORMER I-195 LAND IN

PROVIDENCE, RHODE ISLAND FOR THE BENEFIT OF THE CITY OF PROVIDENCE AND STATE OF RHODE ISLAND BY WORKING WITH BOTH PUBLIC AND PRIVATE ORGANIZATIONS AND INDIVIDUALS TO BUILD PUBLIC, PRIVATE AND INSTITUTIONAL SUPPORT TOWARDS THIS GOAL. THE CORPORATION SHALL NOT BE CONDUCTED OR OPERATED FOR PROFIT AND NO PART OF THE NET EARNINGS OF THE CORPORATION SHALL INURE TO THE BENEFIT OF ANY INDIVIDUAL, NOR SHALL ANY OF EARNINGS OR ASSETS OF THE CORPORATION BE USED OTHER THAN FOR THE PURPOSES OF THE CORPORATION.

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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country	
PRESIDENT	AVA HENTZ	22 PINE TOP ROAD BARRINGTON, RI 02806 USA	
DIRECTOR	RICHARD F. HENTZ	22 PINE TOP BARRINGTON, RI 02806 USA	
DIRECTOR	KRISTINA STARK 56 SOMERSET ST EAST GREENWHICH, RI 02818 US		
DIRECTOR	MATTHEW STARK	56 SOMERSET ST EAST GREENWICH, RI 02818 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

RICHARD F. HENTZ, ESQ. 2088 BROAD STREET CRANSTON, RI 02905

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

Signed this 30 Day of April, 2024 at 4:18:34 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 <u>RICHARD F. HENTZ, ESQ., AUTHORIZED PERSON</u> Signature of Authorized Person

Form No. 631 Revised 09/07

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