

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615

401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 \* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK

\* 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.

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1. Corporate ID No. 156328 Community HIV/AIDS Mobilization For Power (CHAMP)				
3. State of Incorporation 4. Comporate address in Ribble Island - Street Address New York 59 Bainbridge Ave		Providence	Zip RI	
5. Foreign corporation. Enter principal office address	Ciŋ <sup>.</sup>	State	Zíp	
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT)   FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name N/A PhD, RN, MYH Vice President Name N/A			NATORIANE TO CONTRACTORIA	
Street Address Museum Drive	Street Address			
Los Angeles State CA 210 90065	City:	State	Zψ	
Secretary Name Judith Dillard	Treasurer Name Jeff Maskovsky			
2431 Ridgmar Plaza	18 Mattes Lane			
Fort Worth State TX Zip 76116	<sup>cin</sup> Easton	State PA	<sup>Ζ#</sup> 18042	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILE IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3), R.I.G.L. 7-6-23				
Director Name Angela Ards	Naomi Long			
306 Lakeview Terrace				
Princeton State NJ 24 08540	Washington	State DC	<sup>Zg</sup> 2003Z	
Julie Davids	Benedict Francisco Maulbeck			
59 Bainbridge Ave 389 Madison St., Apt				
Providence alle R1 Zip 02909	Brooklyn	State N	11221	
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Chang Agent Name	es require filing of Form 64  Address	1 - R.I.G.L. 7-6-13 / 7-	6-78	
Julie Davids	Citie	$Z_{\Psi}$	2 2	
59 Bainbridge Ave	Providence	δ2	-909	
This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee				

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File Date 114	<b>1 2 5</b> 2008
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Check No. By	
<u> </u>	GINGO
FOR SECRETARY OF	STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all ments contained herein are true and correct Date Title of Officer

p.212.937.7955 f.401.633.7793

## ' Community HIV/AIDS Mobilization for Power (CHAMP) NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008 NAMES AND ADDRESSES OF HE DIRECTORS (Attachment)

CORP. ID # 156328

Robert E. Fullilove, Ed.D. 722 West 168th Street New York, NY 10032

Mark McLaurin 1 North Charles Street, Suite 200 Baltimore, MD 21201

Craig Miller 3550 Wilshire Blvd Los Angeles, CA 90010

Susan Wolfson, Chair, Fundraising Committee 440 Ninth Avenue 16th Floor New York, NY 10001