



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

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

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.

1. Corporate ID No. 107481		2. Name of Corporation Friends of MITCA, Inc	
3. State of Incorporation Rhode Island		4. Corporate address in Rhode Island - Street Address 10 Moore 37 Congress Ave #2	
		City Providence	Zip 02907
5. Foreign corporation. Enter principal office address		City	State Zip
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) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Richard E Harding		Vice President Name	
Street Address 51 Deaconess Rd, Apt 2A		Street Address	
City Concord	State MA	Zip 01742	
Secretary Name Elsa Averbach		Treasurer Name Jeanne M. Moore	
Street Address 33 Sedgwick St		Street Address 37 Congress Ave #2	
City Jamaica Plain	State MA	Zip 02130	City Providence
			State RI
			Zip 02901
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL 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 Sally Castleman		Director Name Harry Johnson	
Street Address 7 Mountain Rd.		Street Address 41 Waverly St.	
City Lexington	State MA	Zip 02173	City Brookline
			State MA
			Zip 02445
Director Name Picks Benjamin		Director Name	
Street Address 76 Bayside Ave		Street Address	
City Warwick	State RI	Zip 02888	City
			State
			Zip
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78			
Agent Name David T. Pradel		Address	
Address 10 W. ... St.		Providence RI 02907	

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

FILED

JUN 30 2008

File Date _____
Check No. _____
By: _____

By: *[Signature]*
1002

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

Jeanne M. Moore 6/26/08
Signature of Officer Date
Jeanne M. Moore
Print or Type Name of Officer
Treasurer
Title of Officer

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