RI SOS Filing Number: 200837463670 Date: 11/03/2008 4:00 PM

STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, *Secretary of State*
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2007

Filing Period: June 1 - June 30 • Filing Fee: $20.00 *

**** 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	2. Name of Corporation		
142603	NIGERIAN NURSES ASSOCIATION OF RI, USA		
3. State of Incorporation	4. Corporate address in Rhode Island - Street Address	City	Zip
RI	172 MASSACHUSETTS AVENUE	PROVIDENCE	02905
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: TO PROMOTE HEALTH CARE AWARENESS AMONG NIGERIANS & AFRICANS IN RHODE ISLAND

7. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name	Vice President Name
MRS FOLAKE ADEWUSI	OMOLARA OKUNFOLAMI
Street Address: 94 VINE ST	Street Address: 172 MASSACHUSETTS AV
City: E. PROV State: RI Zip: 02914	City: PROV. State: RI Zip: 02905
Secretary Name	**Treasurer Name**
MARY AKINNUSOTU	OLUKEMI AKANJI
Street Address: 65 AMERICO DRIVE	Street Address: 268 SMITH ST
City: WARWICK State: RI Zip: 02889	City: CRANSTON State: RI Zip: 02905

8. NAMES AND ADDRESSES OF THE DIRECTORS: *("X" BOX FOR ATTACHMENT)* ☐ **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	Director Name
PAT. ABDULKARIM	IYABO LAWAL
Street Address: 35 LAWN ST	Street Address: 128 WHIPPLE AV
City: PROV State: RI Zip: 02908	City: CRANSTON State: RI Zip: 02920
Director Name	**Director Name**
OLUKEMI LAWAL	RAHEEDA LAMINA-ALARAPON
Street Address: 128 WHIPPLE AV	Street Address: 12 AUBURN AV
City: CRANSTON State: RI Zip: 02920	City: JOHNSTON State: RI Zip: 02919

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	Address		
Address	**City**	**Zip**	

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

FILED

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By KMC

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By:

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27535-3-273562

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.

Signature of Officer — *Date* 11/3/08

OLUKEMI AKANJI
Print or Type Name of Officer

TREASURER
Title of Officer

Form 631 Rev. 12/05