

er...... tee of \$25.00.

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

146680	Sakon	net Peace	Alliance		
3 State of Incorporation	4. Corporate address	in Rhode Island - Street Addr 185 + Main I	Road.	L. compton	02837
5 Foreign corporation. Enter principal office address			City	State	Zip
6. Brief Description of the charac	ter of the affairs which ar	e actually conducted in Rhode	e Island	-	
7. NAMES AND ADDRESS	SES OF THE OFFICE	ERS: ("X" BOX FOR ATTA	CHMENT) THILL IN SPACE	S BEFORE USING ATTA	CHMENTS
President Name Lizabeth R. Torphy			Vice President Name Rev. Daniel Burke		
Street Address 626 We			Street Address 111 Potters ville Rd.		
	State RI	O2831	City Compton	State RI	o2831
Secretary Name Church		Treasurer Name David Doern			
Street Address 00 East Main Rd.			Street Address 44 South of Commons		
City Collanta 10	State 2 T	Zip 0.00	CAN CAMANTAIN	State Z. [Zip D2 8 31

8. NAMES AND ADDRESSES OF THE D	IRECTORS: ("X" BOX FOR ATT	ACHMENT) I FILL IN SPACES BEFORE USING A	THREE (3). R.I.G.L. 7-6-23		
THE NUMBER OF DIRECTORS OF A L	OOMESTIC (RHODE ISLAND)	CORPORATION SHALL NOT BE LESS THAN I	(0). 2		
Elizabeth RTO	orphy	Rev. Daniel Burke			
Street Address 626 West Main Rd		Street Address 111 Potters ville Rd			
City L. Compton State RI	^{Zip} 02831	City L. Compton State	^{zip} 02831		
Director Name Ham Church		David Doern			
Street Address 100 East Main 1	d ·	Street Address 44 South of Commons			
City L. Compton State R	Zip 02837	L. Compton State R. I	· 2831		

9. REGISTERED AGENT IN RHODE ISLAND This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78

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

Check No. 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 statements contained herein are true and correct.

Date

Title of Officer