

A. Ralph Mollis. Secretary of State Corporations Division

148 W. River street

Providence, RI 02904-2615 401.2223040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

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. Согрозине II) Ма	2 Name of Con	2 Name of Corporation				
107481	Friends of N	NITCA, Inc.				
3 State of Incorporation	4. Corporate deli	lress in Rhode Island - Street .	ldeltess	chy	Zipi	
Rhode Island	c/o Aldrich	, 134 Howie Ave.		Warwick	02888	
5. Foreign corporation. Fater paracipal office address			CHI	State	Ziji	
o. Brief Description of the ele	arricter of the affairs whic	h are actually conducted in Rl	book Ashitiel			
The operation of a sc	hool to provide edu	cation and vocational tra	aining for the street working	children of Nicaragua.		
7. NAMES AND ADDE	RESSES OF THE OF	FICERS: C"X" BOX FOR A	TTACHMENT) 🔲 FILL IN SP	PACES BEFORE USING ATT	TACHMENTS	
President Name			Vice President Name			
Richard E. Harding						
Nivet Address			Street Address			
51 Deaconess Road	d, Apt. 2A					
ciņ	Stelle	Zψ	Cit)	Male	Zip	
Concord	MA	01742				
Secretary Name			Treasurer Name			
Elsa Auerbach			William P. Aldrich	<u> </u>		
Mreet Address	1		Street Address			
33 Sedgwick Stree		Tree	134 Howie Ave.	State	(4)	
Cay	State	Ζψ 02420		RI	02888	
Jamaica Plain	MA MESSES OF THE DIE	02130 JECTORS: CTX" BOX FOR	│ Warwick <i>`attachment)</i>			
Director Name	RECTORS OF A DO	TEOTIC (MANONE TORNI	ND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23 Director Name			
Sally Castleman			Harry L. Johnson			
Mircel Address			Mixel Address			
7 Mountain Road			41 Waverly St.			
edgr	State	Z4):	$CH_{\mathcal{F}}$	State	Zip	
Lexington	MA	02173	Brookline	MA	02445	
Director Name			Director Name			
Rick Benjamin						
Street Address			Street Address			
76 Bayside Ave.						
6.11y	State	Zifi	City	Statte	$Z\phi$	
Warwick	RI NT IN BHODE ISLA	02888	I		1	
9. REGISTERED AGE	NI IN KHODE ISLA	.AD				
This information is cur	rently of record in th	e Office of the Secretary	of State. Changes require filin	ig of Form 641 - R.L.G.L. 7-6	5-13/7-6-78	
Thic rasa	rt must be signed by	aither the Provident Vie	ce President, Secretary, Assis	stant Secretary Treasurer I	Receiver or Trustee	
riiis repo	remuse of signed by	entite the resident. Vic	a resource occretary, 2550	same secretary; ricasurer, i	toter or or trainer	

1 07481	Linda manulus of marium Adaptara and offices	
FILED	Under penalty of perjury, I declare and affirm report, including any accompanying schedules a statements contained herein are true and correct	
JUN 09 2009	ivilleam P. Aldreck Signature of Officer	
Check No	William P. Aldrich Print or Type Name of Officer	
FOR SECRETARY OF STATE USE ONLY	Treasurer Title of Officer	