



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 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. Corporate ID No. 000330964		2. Name of Corporation Look After Them International (LATI)			
3. State of Incorporation Rhode Island		4. Corporate address in Rhode Island - Street Address 6 Scenic Ridge Court		City Coventry	Zip 02816
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 Collecting clothing, Toys, books & School supply for children in Need.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Berida Derocher			Vice President Name		
Street Address 6 Scenic Rd CT			Street Address		
City Coventry	State RI	Zip 02816	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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 Michaelle Saintil			Director Name Berida Derocher		
Street Address 14 Duke St			Street Address 6 Scenic Rd CT		
City Providence	State RI	Zip 02908	City Coventry	State RI	Zip 02816
Director Name Kelly Elsworth			Director Name		
Street Address 38 Chaveller Drive			Street Address		
City Coventry	State RI	Zip 02816	City	State	Zip
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

File Date	FILED
Check No.	JUN 29 2009
By:	By 093273
FOR SECRETARY OF STATE USE ONLY	

RECEIVED
CORPORATIONS DIV
SECRETARY OF STATE

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.

P. Derocher
Signature of Officer
Berida Derocher
Print or Type Name of Officer
President
Title of Officer
6/29/09
Date