

A Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

Form 631 Rev. 09/17

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: June 1 - June 30 - Piling Pee: \$20.00* - THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In complete with P. C. 7.5.04 and contenting failure or official and the form of the first annual property within the sine annual description for the first annual property within the sine annual description for the first annual property within the sine annual description for the first annual property within the sine annual description for the first annual description for the first annual property within the sine annual description for the first annu

penalty fee of \$25.00.) file its annual report within the t	time prescribed by law (R.I.G.L	. 7-6-91) is subject to a
1. Corporate II) No.	2. Name of Corporation				
57774	Rhode Island Parents for Progress				
3. State of Incorporation	4. Corporate addr.	4. Corporate address in Rhode Island - Street Address			Zφ
Rhode Island				Providence	02908
5. Foreign corporation. Enter principal office address			City	State	Zip
6. Brief Description of the charact	rr of the affairs which	are actually conducted in Ri	bode island	I	l
Membership of low incom	e families whose	primary purpose is to	work for basic rights, improv	rements and promote self s	sufficiency
7. NAMES AND ADDRESS	ES OF THE OFFI	CERS: ("X" BOX FOR A	<i>ttachment</i>) 🔲 fill in spa	CES BEFORE USING ATTA	ACHMENTS
President Name			Vice President Name		
Dick Silverman			Joseph Bevilacqua		
Street Address			Street Address		
66 Laurel Avenue			51 Burchard Avenue		
City	State	Zip	City	State	7.ip
Providence	RI	02906	Little Compton	RI	02837
Secretary Name Chai Mon Chon		-	Treasurer Name		
Chai Mee Chen			Dan McCarthy		
Street Address 15 Arch Street			Street Address Q5 Moldon May		
			95 Walden Way		
	State	Zip	City	State	Zip
Providence 8. Names and address	IRI Es of the Direct	02907	[Cranston	RI	02921
			ATTACHMENT) FILL IN SPA		
INB NUMBER OF DIRECT Director Name	OKS OF A DOM.	ESTIG (RHODE ISLAI	ND) CORPORATION SHALL	NOT BE LESS THAN THE	BE (3). R.I.G.L. 7-6-23
-			Director Name		
Lenette Azzi-Lessing			Steve Crosby		
			Street Address		
0 Dimond Avenue			83 Penniman Place		
City	State	Zip	City	State	Zip
Bristol	_RI	02809	Brookline	MA_	02445
Director Name Peter Lee			Director Name		
Street Address					
			Street Address		
7 Burgess Street	State	700			
City Providence	State	Zip	City	State	Zip
Providence 9. registered agent in	RI	02903	•	į	1
/• medistrady avent in	MANUS ISLAND	•			
This information is currently	of record in the C	Office of the Secretary of	f State. Changes require filing (of Form 641 - R.J.G.L. 7-6-1	3/7-6-78
					
This report mus	st be signed by eit	ther the President, Vice	President, Secretary, Assista	nt Secretary, Treasurer, Re-	ceiver or Trustee
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- 3/	/ / '		** *		
				f perjury, I declare and affirm	
	- 0 - 0			any accompanying schedules inedification are true and correct	
Lu 1	9-19	İ	Statistical Extens	Silver as	
File Date	/ 0/		Diae	-) 6/23/07
mus 1/2/17	14191	' <i>X</i>	Signature of Office	er	Date
Check No. / W / /	11011	/ _	Dick Silvem	nan	
But I	mma	<i>/</i>	Print or Type Nan		
Ву:	, , , , , , , , , , , , , , , , , , , 	-	President		
FOR SECRETARY OF S	STATE USE ONLY	1	Tule of Officer	· · · · · · · · · · · · · · · · · · ·	
			tute of Officer		