

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 2008.

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.		, , , , ,		me presente by and (101.0.11	7-0-71) is subject to a	
1. Corporate ID No.	2. Name of Corporation					
154109	Miss Liberia Rhode Island Committee					
3. State of Incorporation	4. Corporate addres	ss in Rhode Island - Street	Address	City	Zip	
Rhode Island	243 Manton A	Avenue		Providence	02909	
5. Foreign corporation. Enter principal office address			City	State	Ζψ	
6. Brief Description of the cha	tracter of the affairs which a	ire actually conducted in R	bode Island			
Promotes youth develop	opment in the commu	mity through education	on, skills, talents, etc.; annual	lly organizes Miss Liberia b	eauty pageant	
			TTACHMENT) [] FILL IN SPA			
President Name	LOOLS OF THE GITTE	LES. ( A BOATOR A	Vice President Name	ICES BEFURE USING ALIA	CHMENIS	
Matilda V. Washington			Beatrice Dorley			
Street Address			Street Address			
511 Manton Avenue			60 Lindy Avenue			
City	State	Ζψ	Сиу	State	Zφ	
Providence	RI	02909	Providence	RI	02908	
Secretary Name			Treasurer Name			
Emmanue R. Paulus			Parina Washington			
Street Address			Street Address			
5 Huron Street		<b>,</b>	9 Melton Street			
City	State	Zφ	City	State	Ζίφ	
Providence	RI 02908		Pawtucket	] RI	02860	
			ATTACHMENT) FILL IN SPA			
	ECTORS OF A DOME	ESTIC (RHODE ISLA	ND) CORPORATION SHALL	NOT BE LESS THAN THR	EE (3). R.I.G.L. 7-6-23	
Director Name			Director Name			
Matilda V. Washington			Beatrice Dorley			
Street Address			Street Address			
511 Manton Avenue			60 Lindy Street			
City	State	2φ	City	State	Zip	
Providence	RI	02909	Providence	RI	02908	
Director Name Parina Washington			Director Name Emmanel R. Paulus			
Street Address			Street Address			
9 Melton Street			5 Huron Street			
City	State	Ζίρ	Cuy	State	Zψ	
Pawtucket	RI	02860	Providence	RI	02908	
9. REGISTERED AGEN	T IN RHODE ISLAND	•				
This information is curre	ently of record in the O	Office of the Secretary	of State. Changes require filing	of Form 641 - R.I.G.L. 7-6-1	3/7-6-78	
This report	must be signed by eit	her the President, Vic	e President, Secretary, Assista	unt Secretary, Treasurer, Rec	ceiver or Trustee	

<b>154109</b>	Under penalty of perjury, I declare and affirm that I have examined the	
File Date  FILED  Check No.  JUL 0 9 2009	report, including any accompanying schedules and statements, and that a statements contained herein are true and correct  Signature of Officer  Date  Matilda V. Washington  Print or Type Name of Officer	<u>—</u>
FOR SECRETARY OF STATE USE ONLY	Ald SNOTIVED TO Print or Type Name of Officer  President/Director  Title of Officer  Form 631 Rev. 09/1	- 17