

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

penalty fee of \$25.00.						
1. Corporate ID No. 161774	2. Name of Corporation NOTHERN NARRAGANSETT INDIAN TRIBE OF RHODE ISLAND					
3. State of Incorporation		in Rhode Island - Street Addr		City	Zip	
RHOBE ISLAND		OAD STREET S	V//E ~03	PROVIDENCE	02907	
5. Foreign corporation. Enter principal office address			City _	State	Zip	
- NONC 6. Brief Description of the character of the affairs which are actually conducted in Rhode 70 IN SURC KE CONITION AS DECENTANTS				<u> </u>	<u> </u>	
6. Brief Description of the characte	r of the affairs which are BONITION #5	actually conducted in Rhode DECENTANT 5	of NARRICHAUSEN	INDIAN TRIBA	<i>2</i>	
7. NAMES AND ADDRESS	ES OF THE OFFICE	RS: ("X" BOX FOR ATTA	CHMENT) [FILL IN SPACES]	BEFORE USING ATTACH	IMENTS	
President Name			Vice President Name			
OTIS BLISS			DOLORES PROUT			
Street Address 106 MINCR STREET			Street Address 182 ONTARIO STREET City State			
City	State	Zip	City	State	Zip	
PROVIDENCE	<u> </u>	02905	PROVIDENCE	I KI	02907	
Secretary Name			Treasurer Name			
BRIDGETT KING			Eucenia Ashe			
Street Address 199 SANDTURN RD			Street Address 18 LOVISA STRECT			
City	State	Zip	City	State	Zip	
WEST KINGSTON	RI	02892	PROVIDENCE	IRT	12905	
8. NAMES AND ADDRESSI	S OF THE DIRECT	ORS: ("X" BOX FOR ATI	TACHMENT) FILL IN SPACES	BEFORE USING ATTACI	IMENTS	
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			Director Name			
Otis Bliss			Dolores PROUT			
Street Address			Street Address			
106 MINER STREET			182 ONTARIO ST.			
PROVIDENCE	State R.T	02905	Plovidence	State RZ	12907	
Director Name			Director Name			
Eugenia	ASHE		None -			
Street Address			Street Address			
18 LOUISIA STREET						
City:	State	Zip	City	State	Zip	
PROvidence	一个工	02905	·	 ~	,	
9. REGISTERED AGENT IN RHODE ISLAND						
Dolores PROUT 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 mus	st be signed by eithe	r the President, Vice Pr	resident, Secretary, Assistant Se	cretary, Treasurer, Receiv	er or Trustee	

FILED	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.
Check No. JUL 2 0 2009 LO: Hd 02 70 6002 By: By 064899 AIC SHOTTAND HD2	Signature of Officer Date Print or Type Name of Officer
FOR SECRETARY OF STATE USE ONLY, SIVE SIVE SIVE SIVE SIVE SIVE SIVE SIVE	Tule of Officer Form 631 Rev. 09/17