

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.

penatty see of \$25.00.	: _					
1. Corporate ID No.	2. Name of Corporat	ion				
71705	JOHN F. SPELLMAN CENTER					
3. State of Incorporation	4. Corporate address in Rhode Island - Street Address			CHy	Zip	
RHODE ISLAND	125 BENTLEY STREET			EAST PRO	VIDEN(02914	
5. Foreign corporation. Enter principal office address			Citr	State	ZΨ	
<u> </u>				<u></u>		
6. Brief Description of the character	of the affairs which ar	re actually conducted in Rb	ode Island			
✓						
7. NAMES AND ADDRESSE	S OF THE OFFICE	ERS: ("X" BOX FOR AT	TACHMENT)	CES BEFORE USING A	ATTACHMENTS	
President Name			Vice President Name			
EARNEST OKWARA			BONNIE ABOLS			
Street Address			Street Address			
125 BENTLEY STREET			121 JOHN STREET			
City	State	Zip	City	State	Zip	
EAST PROVIDENCE	RI	02914	WARWICK	RI	02889	
Secretary Name			Treasurer Name			
MARY TOMASIAN	· · · ·		NANCY FULLER			
Street Address				Street Address		
843 OAKHILL AVENUE	1		12 EVA STREET City State Zip			
City	State	Zip	Gity	State	02908	
ATTLEBORO	MA	02860	PROVIDENCE <i>attachment</i>)	RI		
	ORS OF A DOME	STIC (KHODE ISLA)	ND) CORPORATION SHALL Director Name	NOI BE LESS I HAN	111REE (3). K.1.G.L. 7-0-23	
Director Name						
MARIA OKWARA			MARY LOMASTRO Street Address			
Street Address			96 RAWLINSON DRIVE			
125 BENTLEY STREET	State	Zip	City	State	Zip	
EAST PROVIDENCE	RI	02914	COVENTRY	RI	02816	
Director Name	INI	102514	Director Name		102010	
EARNEST OKWARA			Israelos rumo			
Street Address			Street Address			
125 BENTLEY STREET						
City	State	Zip	City	State	Zip	
EAST PROVIDENCE	RI	02914	l	1		
9. REGISTERED AGENT IN	RHODE ISLAND	1				
This information is currently	of record in the C	Office of the Secretary of	of State. Changes require filing	of Form 641 - R.I.G.L.	7-6-13/7-6-78	
This report mus	at he signed by eit	her the President Vic	e President, Secretary, Assista	int Secretary. Treasure	r. Receiver or Trustee	

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File Date	FILED			
Check No.	DEC 21 2009			
Ву:	By 189			
FOR SECRETARY OF STATE USE ONLY				

1	,	
Under pena	ty of perjury I declare and affirm that I	have examined this
	ding any accompanying schedules and sta	
statements	ontdined herein are true and correct.	17/04
· 1	14	
Signature V f	Officer	Date

EARNEST I. OKWARA

Print or Type Name of Officer

PRESIDENT/DIRECTOR (Chairman of Brd)

Title of Officer