



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Non-Profit Corporation  
Annual Report**

Filing Period: June 1 - June 30

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.

**ANNUAL REPORT YEAR:** 2010

**1. Corporate ID No.** 000522039

**2. Name of Corporation** PL-AIDS Project (Partners in Learning about AIDS Project)

**3. State of Incorporation**

State:

**4. Corporate Address in Rhode Island**

No. and Street: 1006 CHARLES STREET, SUITE 5

City or Town: NORTH PROVIDENCE

State: RI Zip: 02904 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:

City or Town: State: Zip: Country:

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

PL-AIDS Project is an HIV/AIDS advocacy and prevention organization that seeks to reduce the spread of HIV/AIDS and focuses heavily on the development and promotion of biomedical HIV prevention strategies. Founded by Brown University medical and public health students, at its core, this corporation has a specific mission to bring Brown University undergraduate, graduate, and medical students to global sites where unique cultural exchanges can develop between local collaborators and Brown students with the eventual goal of assisting in the creation of culturally relevant public health interventions tailored to local cultures. No less important is the organization's interest in engaging directly with local communities. PL-AIDS Project seeks to help develop novel biomedical HIV prevention strategies for high-risk BGLT, Latino, and Asian communities within the southern New England area.

**7. Names and Addresses of the Officers and Directors:**

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
SECRETARY	JONATHAN SUNG	2 CARRIAGE DRIVE LINCOLN, RI 02865 USA
DIRECTOR	HAROLD COLERIDGE	501 LEXINGTON ST.-APT 54 WALTHAM, MA 02452 USA
DIRECTOR	JONATHAN SUNG	2 CARRIAGE DRIVE LINCOLN, RI 02865 USA
PRESIDENT	GAVIN MYERS	PO BOX 2459 PROVIDENCE, RI 02906 USA
DIRECTOR	NHUT GIUC TRAN	702 SNYDER AVE. PHILADELPHIA, PA 19489 USA
TREASURER	HAROLD COLERIDGE	501 LEXINGTON ST.-APT 54 WALTHAM, MA 02452 USA
DIRECTOR	CHRISTINE ONG	148 WATERMAN ST., APARTMENT #4 PROVIDENCE, RI 02906 USA
DIRECTOR	GAVIN MYERS	P.O. BOX 2459 PROVIDENCE, RI 02906 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER**  
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

JONATHAN SUNG 1006 CHARLES STREET, SUITE 5 NORTH PROVIDENCE , RI 02904

**9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver, or Trustee.**

**Signed this 12 Day of September, 2010 at 10:33:35 PM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By GAVIN MYERS

Signature of Officer of the Corporation

President or  Vice President or  Secretary or  Assistant Secretary or

Treasurer or  Receiver or  Trustee (check one)

**This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.**