



**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. 000506021

2. Name of Corporation Friends of Gabon

3. State of Incorporation

State:

4. Corporate Address in Rhode Island

No. and Street: 4 RHODE ISLAND AVE

City or Town: PROVIDENCE

State: RI Zip: 02906 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

TO CONTINUE THE VOLUNTEER WORK DESCRIBED BELOW AND BEGUN IN 1986 OF FORMER PEACE CORPS VOLUNTEERS WHO SERVED IN GABON, AFRICA. SPECIFICALLY, THE ORGANIZATION WILL: 1. PRODUCE A QUARTERLY NEWSLETTER DISCUSSING TOPICS RELATING TO GABON, AND PROVIDING A FORUM WHERE VOLUNTEERS CAN WRITE ARTICLES OF INTEREST ABOUT GABON AND SEEK TO RECONNECT WITH OTHER MEMBERS 2. EDUCATE PERSONS LIVING IN THE US ABOUT GABON AND THE PEACE CORPS GABON 3. ORGANIZING ANNUAL REUNION ONCE A YEAR WHERE VOLUNTEERS CAN SPEND A FEW DAYS RECONNECTING AND BRINGING THEIR FAMILIES. 4. PROVIDE ADVICE AND ASSISTANCE TO MEMBERS INCLUDING NEWLY DISCHARGED VOLUNTEERS. 5. THROUGH MEMBERSHIP DUES, SUPPORTING PROJECTS OF AN EDUCATIONAL OR DEVELOPMENTAL NATURE THAT RELATE TO GABON. 6. LIAISING WITH THE NATIONAL ASSOCIATION OF RETURNED PEACE CORPS VOLUNTEERS IN WASHINGTON, DC TO ACHIEVE THE ABOVE

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JOAN MATHIEU MS.	4 RHODE ISLAND AVE PROVIDENCE, 02
DIRECTOR	JOAN MATHIEU MS.	4 RHODE ISLAND AVE PROVIDENCE, RI 02906 USA
DIRECTOR	MIKE CRANE MR.	21 IVY LANE, STE 202 BURLINGTON, VT 05408 USA
DIRECTOR	BARBARA BENSON MS.	235 DUBOSE AVE. ATHENS, GA 30601 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**

JOAN MATHIEU 4 RHODE ISLAND AVE PROVIDENCE , RI 02906

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

Signed this 21 Day of September, 2010 at 2:27:34 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 JOAN MATHIEU

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.

Form No. 631
Revised 09/07

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