

A. Ralpb 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 2011

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

penaity jee of \$25.00.							
1. Corporate ID No.	2. Name of Corporation NEWPOR	T CONGRE	FATIONAL CHO	aRCH			
3. State of Incorporation	4. Corporate address in Rh	oode Island - Street Address	st.	NEUPORT	02840		
5. Foreign corporation. Enter principal office address N い い に に に に に に に に に に に			NONE	State NONE	WW F		
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island							
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) [FILL IN SPACES BEFORE USING ATTACHMENTS							
President Name ANDREW LANK			Vice President Name No N E				
Street Address 9 \(LEE'S \)	WHARF		Street Address NONE				
NEWPORT	State RI	0 7840	City NONE	State NONE	Zip MUNE		
Secretary Name ELLEN BUZYAN			Treasurer Name ARAKEL BOZYAN				
Street Address INDIAN AUE.			Street Address 535 INDIAN AUF.				
MIDOLETOWN	State RI	^{Zp} 02842	City MIDONETOWN	State R.L	02842		
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS 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	OKS OF A DOMESTIC	. (KHUDE ISLAND) C	OKPORATION SHALL NOT B Director Name	<u>E LESS IHAN INKEE</u>	(3). K.I.G.L. /-0-23		
REU. MARY	Y BETH	HAYES	ELIZABETH	BOZYAN			
Street Address 52 MASSASOIT AUE.			Street Address 535 INDIAN AVE.				
BARRINGTON	State RI	^{Zip} 02806	MIDOLETOWN	State RI	02845		
MRAKEL BOZIAN			Director Name				
Street Address INDIAN AVE.			Street Address				
MIDOLETOWN 9. REGISTERED AGENT IN	State RI RHODE ISLAND	O2847	City	State	SEC SEC		
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-							
This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver Trustee							

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Under penalty of perjury, I declare and affirm report, including any accompanying schedules	
statements contained herein are true and corre	ct. 9/29/11
Signature of Officer	Пате
Printer Type Name of Officer	-
Title of Officer	