



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:** 2012

**1. Corporate ID No.** 000123883

**2. Name of Corporation** Watlao Xoke Xayyaram Buddhist Temple

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 115 RAILROAD STREET

City or Town: WOONSOCKET State: RI Zip: 02895 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**

1) Said organization is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501 (c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

2) Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of the organization is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

Under penalties of perjury, I declare that I have examined this information, including accompanying

documents, and, to the best of my knowledge and belief, the information contains all the relevant facts relating to the request for the information, and such facts are true, correct, and complete.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	TOM THIPPHAVONG	45 RUBY STREET WOONSOCKET, RI 02895 USA
TREASURER	VANE CHOMPHRANOUVONG	339 EAST SCHOOL STREET WOONSOCKET, RI 02895 USA
SECRETARY	PIN MANIVONG	72 REGENT AVE PROVIDENCE, RI 02908 USA
VICE PRESIDENT	SYVONE VORABOUT	81 FARM STREET PROVIDENCE, RI 02908 USA
DIRECTOR	KHAM INTHISONE	397 GROVE STREET WOONSOCKET , RI 02895 USA
DIRECTOR	SYNUANE SYSAVATH	287 AMHURST ST PROVIDENCE, RI 02909 USA
DIRECTOR	CHANH SENGSOUVANH	295 NINTH AVE WOONSOCKET, RI 02895 USA
DIRECTOR	KHAMBOTH PHANTHAVONG	268 S MAIN STREET WOONSOCKET, RI 02895 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**

TOM THIPPHAVONG 115 RAILROAD STREET WOONSOCKET , RI 02895

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

**Signed this 30 Day of May, 2012 at 4:57:34 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 TOM THIPPHAVONG  
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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