



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: 2014

1. Corporate ID No. 000030051

2. Name of Corporation Teofilo Braga Brotherhood, Literary, and Social Club

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 26 TEOFILO BRAGA WAY

City or Town: EAST PROVIDENCE

State: RI Zip: 02914 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

PORTUGUESE AMERICAN FRATERNAL ORGANIZATION

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	ARMANDO MEDEIROS	44 MAYFLOWER STREET EAST PROVIDENCE, RI 02914 USA
TREASURER	OLIMPIO MEDEIROS	16 FOREST AVENUE RIVERSIDE, RI 02915 USA
SECRETARY	JAMES REGAN	32 RUTH AVENUE

		RUMFORD, RI 02916 USA
VICE PRESIDENT	JOHN PERRY	4 CAROUSEL DR WEST RIVERSIDE, RI 02915 USA
DIRECTOR	JOSE CAVACO	50 GROVE AVENUE EAST PROVIDENCE, RI 02914 USA
DIRECTOR	TONY GRILO	59 BUNKER STREET SEEKONK, MA 02771 USA
DIRECTOR	FRED PERRY	107 CATALPA AVENUE RIVERSIDE, RI 02915 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**

ARMANDO MEDEIROS 16 FOREST AVENUE EAST PROVIDENCE , RI 02915

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

Signed this 30 Day of June, 2014 at 4:35:56 PM by the authorized person. *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 company, 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 ARMANDO MEDEIROS
Signature of Authorized Person

Form No. 631
Revised 09/07