



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
 Office of the Secretary of State - Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

2014 AUG 22 PM 2:08  
 SECRETARY OF STATE  
 CORPORATIONS DIV.

**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013**  
 Filing Period: June 1 - June 30 • This report must be typed or printed legibly.  
 Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <b>157938</b>		2. Exact name of the Corporation <b>Justin A L Goods Memorial Foundation (JLGF)</b>	
3. State of Incorporation <b>Rhode Island</b>		4. Brief description of the character of business conducted in Rhode Island <b>Non Profit Orphanage, education, medical, feeding, counseling</b>	
5. Principal office address <b>52 Butler Ave</b>		City <b>Central Falls</b>	State <b>RI</b>
		Zip <b>02863</b>	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
President Name <b>Edifice Bemah</b>		Vice-President Name <b>Thao Nimneh</b>	
Street Address <b>52 Butler ave</b>		Street Address <b>52 Butler Ave</b>	
City <b>Central falls</b>	State <b>RI</b>	Zip <b>02863</b>	
Secretary Name <b>Lilay Kollie</b>		Treasurer Name <b>Monah Rhodes</b>	
Street Address <b>116 Elmdate ave</b>		Street Address <b>150 Lakeview drive</b>	
City <b>Prov</b>	State <b>RI</b>	Zip <b>02909</b>	City <b>Providence</b>
			State <b>RI</b>
			Zip <b>02910</b>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
Director Name <b>Alberta Nimneh</b>		Director Name <b>Alice Johnson</b>	
Street Address <b>52 Butler ave</b>		Street Address <b>396 Blackstone street</b>	
City <b>Central falls</b>	State <b>RI</b>	Zip <b>02863</b>	City <b>Providence</b>
			State <b>RI</b>
			Zip <b>02907</b>
Director Name <b>Bernadette Nimneh</b>		Director Name <b>Nekpo Brown</b>	
Street Address <b>171 Hudson st</b>		Street Address <b>339 Nottingham st</b>	
City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</b>	City <b>Springfield</b>
			State <b>MA</b>
			Zip <b>01011</b>
8. REGISTERED AGENT IN RHODE ISLAND			
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.			

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

File Date \_\_\_\_\_

Check No \_\_\_\_\_

By: \_\_\_\_\_

FOR SECRETARY OF STATE USE ONLY BY

**FILED**

**AUG 22 2014**

**BL 230882**

**2:08**

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

*Edifice Bemah*

Signature of Officer or Authorized Representative

**8/22/14**

Date

**Edifice Bemah**

Print or Type Name of Officer or Authorized Representative