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. 000789341

2. Name of Corporation Sumba Youth Initiative

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 226L WEST MAIN ROAD
City or Town: LITTLE COMPTON State: RI Zip: 02837 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

CHARITABLE

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	CHRISTINA E NIXON	226L W. MAIN ROAD LITTLE COMPTON, RI 02837 USA
VICE PRESIDENT	KATE NIXON	32 LAWRENCE ST BOSTON, MA 02116 USA
DIRECTOR	ROGER GUILLEMETTE	226K W. MAIN RD

		LITTLE COMPTON, RI 02837 USA
DIRECTOR	JAMES L HODGE	1140 W. 35TH ST ERIE, PA 16508 USA
DIRECTOR	CHRISTINA E NIXON	226L W. MAIN ROAD LITTLE COMPTON, RI 02837 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

CHRISTINA E. NIXON 226L W. MAIN ROAD LITTLE COMPTON , RI 02837

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

Signed this 26 Day of January, 2015 at 2:47:21 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 CHRISTINA E. NIXON
Signature of Authorized Person

Form No. 631
Revised 09/07

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