



**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: 2015

1. Corporate ID No. 000145147

2. Name of Corporation Mikveh Ladies Association of Rhode Island

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 322 COLE AVENUE

P.O. BOX 603194

City or Town: PROVIDENCE

State: RI

Zip: 02906

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

TO AID WOMEN IN ORTHODOX JEWISH RELIGIOUS PRACTICES AND RITUAL
OBSERVANCE BY WORKING TO INSURE LOCAL AVAILABILITY OF APPROPRIATE
SERVICES, SUPPLIES, FACILITIES AND EDUCATIONAL ACTIVITIES CONSISTENT WITH
THE ABOVE

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	MARCIE INGBER	128 FIFTH STREET

		PROVIDENCE, RI 02906 USA
DIRECTOR	MARCIE INGBER	128 FIFTH STREET PROVIDENCE, RI 02906- USA
VICE PRESIDENT	SIGAL GOTTLIEB	322 COLE AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	SHIFRA YUDKOWSKY	23 ELMWAY ST PROVIDENCE, RI 02906 USA
DIRECTOR	LEEBA TAITELBAUM	71 SARGENT AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	RACHEL KARP	33 TAFT AVE PROVIDENCE, RI 02906 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**

SIGAL GOTTLIEB 322 COLE AVENUE PROVIDENCE , RI 02906

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

Signed this 1 Day of May, 2015 at 8:49:55 AM 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 SIGAL GOTTLIEB
Signature of Authorized Person

Form No. 631
Revised 09/07

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