RI SOS Filing Number: 201561617250 Date: 05/13/2015 4:00 PM

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

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2015

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	2. Exact name of the Corporation
130846	Caring for China Center
3. State of Incorporation	4. Brief description of the character of business conducted in Rhode Island
RI	To support the development of china democracy at the grassroots level,coordinate projects sending the underprivileged communities of china.

5. Principal office address	City	State	Zip
202 10th ST, Providence RI 02906	Providence	RI	02906

6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

President Name	Vice-President Name
Wenli Xu	None
Street Address	Street Address
202 10th ST	
City / State / Zip	City / State / Zip
Providence / RI / 02906	
Secretary Name	Treasurer Name
Fang Wang	None
Street Address	Street Address
6722 Tudor Lu Apt 1	
City / State / Zip	City / State / Zip
Westmont / IL / 60559	

7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) ☐

Director Name	Director Name
Xintong He	Peiyu Wu
Street Address	Street Address
202 10th ST	1055 Rosita Road
City / State / Zip	City / State / Zip
Providence / RI / 02906	Del Rey Oaks / CA / 93940
Director Name	Director Name
Zhenyuan Cui	
Street Address	Street Address
3544 S Pass Rd	
City / State / Zip	City / State / Zip
Ever son / WA / 98247	

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

RECEIVED
2015 MAY 13 AM 9:16
SECRETARY OF STATE
CORPORATIONS DIV

FILED
MAY 13 2015
BY CR 248826

File Date _____
Check No _____
By: _____

FOR SECRETARY OF STATE USE ONLY

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.

Wenli Xu 5/13/2015
Signature of Officer or Authorized Representative Date

WENLI XU President
Print or Type Name of Officer or Authorized Representative

Form No. 631
Revised: 04/2014
120807-1-1010443