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. 000855850

2. Name of Corporation Janusz Korczak Polish Language School

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 16 WINDWOOD DR.
City or Town: TIVERTON State: RI Zip: 02878 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 SERVE THE NEIGHBORING COMMUNITIES WITH POLISH LANGUAGE CLASSES

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	MARIA LOMZYNSKA DE RIS	12 BENTWOOD ST FOXBOROUGH, MA 02035 USA
TREASURER	MARIA SZELAG	16 WINDWOOD DR. TIVERTON, MA 02878 USA
SECRETARY	MARTA KMIECIK	645 HIGH APT. 3R

		CENTRAL FALLS, RI 02863 USA
DIRECTOR	TOMASZ BROJEK	9 RIVERSIDE AVE. ATTLEBORO, MA 02703 USA
DIRECTOR	MAGDALENA BAKOWSKI	263 MENDON R. S. ATTLEBORO, MA 02703 USA
DIRECTOR	IWONA WAROT	16 FREDERICK A NITTEL DR. N. ATTLEBORO, MA 02760 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

MARIA SZELAG 16 WINDWOOD DRIVE TIVERTON , RI 02878

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

Signed this 17 Day of June, 2015 at 9:34:49 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 MARIA LOMZYNSKA DE RIS
Signature of Authorized Person

Form No. 631
Revised 09/07

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