



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. 000150821

2. Name of Corporation The Black Air Foundation, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: P.O. BOX 603178

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 CREATE AND PROVIDE CULTURALLY RELEVANT EDUCATIONAL RESOURCES TO MINORITY, UNDERPRIVILEGED AND DISENFRANCHISED YOUTH AND ADULT POPULATIONS

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address
SECRETARY	PHILOMENE B MEDINA	40 WINTHROP STREET RIVERSIDE, RI 02914 USA
ASSISTANT SECRETARY	KAS R DECARVALHO ESQ	317 IRON HORSE WAY, SUITE 301

		PROVIDENCE, RI 02908 US
DIRECTOR/PRESIDENT	ROBERT LIMA	44 DARBY ROAD BROCKTON, MA 02302 US
DIRECTOR	MARCUS PALMORE	302 PROVIDENCE STREET WOONSOCKET, RI 02895 US
DIRECTOR	NAPOLEON TEIXEIRA	45 ROMA STREET EAST PROVIDENCE, RI 02914 US
DIRECTOR	JERRY MORGAN	1486 BROAD STREET PROVIDENCE, RI 02905 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**

KAS R. DECARVALHO, ESQ. PANNONE LOPES DEVEREAUX & WEST LLC 317 IRON HORSE WAY,
SUITE 301 PROVIDENCE , RI 02908

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

Signed this 22 Day of June, 2015 at 12:05:19 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 ROBERT M.LIMA SR.
Signature of Authorized Person

Form No. 631
Revised 09/07