



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. 000276492

2. Name of Corporation Single-minded With A Vision (SWAV), Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 31 DROWNE STREET

City or Town: CRANSTON

State: RI

Zip: 02905

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

FAITH BASED GROUP TO HELP SUPPORT AND EMPOWER WOMEN TRANSITIONING FROM WELFARE TO WORK

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
TREASURER	MELVINN LITTLE	209 NARRAGANSETT AVENUE PROVIDENCE, RI 02907 USA
SECRETARY	MELVINN LITTLE	209 NARRAGANSETT AVENUE PROVIDENCE, RI 02907 USA

PRESIDENT	EVA GAMBLE	31 DROWNE STREET CRANSTON, RI 02905 USA
VICE PRESIDENT	EVA GAMBLE	31 DROWNE STREET CRANSTON, RI 02905 USA
DIRECTOR	BERNITA WRIGHT	4381B N 7TH STREET ABILENE, TX 79603 USA
DIRECTOR	TRACY GORE-WALKER	1 CADILLAC DRIVE, APT 717 PROVIDENCE, RI 02907 USA
DIRECTOR	MARY A OSUNBA	68 LAURA STREET PROVIDENCE, RI 02907 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**

EVA M. GAMBLE 31 DROWNE STREET CRANSTON , RI 02905

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

Signed this 25 Day of June, 2015 at 8:55:26 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 EVA M. GAMBLE
Signature of Authorized Person

Form No. 631
Revised 09/07

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