



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: 2016

1. Corporate ID No. 000114277

2. Name of Corporation Salamatu Foundation

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 487 CAROLINA BACK ROAD

P.O. BOX 92

City or Town: CAROLINA

State: RI Zip: 02812 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

DEDICATED TO ESTABLISHING LIBRARY/RESOURCE CENTERS IN LESS DEVELOPED REGIONS OF THE WORLD.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
PRESIDENT	ANDREW AYERS	85 2ND PLACE #1L BROOKLYN, NY 11231 USA
TREASURER	JOAN SEITES	PO BOX 92

		CAROLINA, RI 02812 USA
DIRECTOR	LEONORA VAN HOOK	487 CAROLINA BACK ROAD CAROLINA, RI 02812
VICE PRESIDENT	AMY SORENSON	4457 BACCICH ST. NEW ORLEANS, LA 70122 USA
DIRECTOR	ELIZABETH REYES	11 VINE ST EXETER, NH 03833 USA
DIRECTOR	RICHARD SCHARNINGHAUSEN	176 MYSTIC RD NO. STONINGTON, CT 06359 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**

LEONORA VAN HOOK 487 CAROLINA BACK ROAD P.O. BOX 92 CAROLINA , RI 02812

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

Signed this 15 Day of June, 2016 at 11:58:07 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 JOAN SEITES
Signature of Authorized Person

Form No. 631
Revised 09/07