



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. 000107481

2. Name of Corporation Friends of NITCA, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 42 GASPEE POINT DRIVE

City or Town: WARWICK

State: RI Zip: 02888 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

THE OPERATION OF A SCHOOL TO PROVIDE EDUCATION AND VOCATIONAL TRAINING FOR THE STREET WORKING CHILDREN OF NICARAGUA.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	WILLIAM PINE ALDRICH	42 GASPEE POINT DRIVE WARWICK, RI 02888 USA
SECRETARY	ELSA AUERBACH	33 SEDGWICK STREET JAMAICA PLAIN, MA 02130 USA

DIRECTOR	RICHARD HARDING	51 DEACONESS RD., APT 2A CONCORD, MA 01742 USA
DIRECTOR	SALLY CASTLEMAN	7 MOUNTAIN RD. LEXINGTON, MA 02420 USA
PRESIDENT	KEVIN MCNALLY	40 MOUNT HOPE CIRCLE DUXBURY, MA 02332 USA
DIRECTOR	HARRY L JOHNSON	41 WAVERLY STREET BROOKLINE, MA 02445 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**

WILLIAM P. ALDRICH 42 GASPEE POINT DRIVE WARWICK , RI 02888

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

Signed this 21 Day of June, 2016 at 11:22:14 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 WILLIAM P. ALDRICH
Signature of Authorized Person

Form No. 631
Revised 09/07