



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

Foreign Non-Profit
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. 000025054

2. Name of Corporation PLAN INTERNATIONAL, INC.

3. State of Incorporation

State: NY

4. Corporate Address in Rhode Island

No. and Street: 155 PLAN WAY
P.O. BOX 7670

City or Town: WARWICK State: RI Zip: 02886 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 PROVIDE SOCIAL AND DEVELOPMENT SERVICES, AND/OR FINANCIAL AND MATERIAL ASSISTANCE TO OR FOR THE BENEFIT OF CHILDREN AND THEIR FAMILIES AND COMMUNITIES IN DEVELOPING COUNTRIES

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
CEO	ANNE-BIRGETTE ALBRECHTSEN	DUKE STREET, DUKES COURT, BLOCK A WOKING, SURREY GU215BH GB
DIRECTOR	GUNOV KRONMAN	KORPASVAGEN 8 C HELSINGFORS FIN
DIRECTOR	WERNER BAUCH	BRAMFELDER STRASSE 70

		HAMBURG 22305 DEU
DIRECTOR	DOROTA KEVERIAN	4 BENNINGTON ROAD LEXINGTON, MA 02421 USA
DIRECTOR	ANNE SKIPPER	24 MARKET STREET ADELAIDE, 5000 AUS
DIRECTOR	GUENTER HAAG	OTHMARSTRASSE 8, CH-8024 ZURICH, SWZ
DIRECTOR	GERALD HUESTON	4101 QUEENS SQ. SOUTHBANK VICTORIA, 3006 AUS
DIRECTOR	JOSHUA LISWOOD	272 CORTLEIGH BLVD TORONTO, ONT, M5N 1P9 CAN

**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**

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 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 22 Day of June, 2016 at 11:03:36 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 WERNER BAUCH
Signature of Authorized Person

Form No. 631
Revised 09/07

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