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. 000815013

2. Name of Corporation Chabad Youth of Providence, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 27 TAFT AVE
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

A. THIS CORPORATION IS ORGANIZED AND OPERATED EXCLUSIVELY FOR RELIGIOUS PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, INCLUDING FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS UNDER SECTION 501 (C)(3) OF THE INTERNAL REVENUE CODE, OR THE CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE. B. THE SPECIFIC PURPOSE OF THIS CORPORATION IS TO PROMOTE AND SPREAD JUDAISM, PRIMARILY BY PROVIDING SPIRITUAL GUIDANCE AND INSTRUCTION TO MEMBERS OF THE JEWISH FAITH, ACCORDING TO THE TEACHINGS OF CHABAD-LUBAVITCH AND THE LUBAVITCHER REBBE. C. NO SUBSTANTIAL PART OF THE ACTIVITIES OF THIS CORPORATION SHALL CONSIST OF CARRYING ON PROPAGANDA, OR OTHERWISE ATTEMPTING TO INFLUENCE LEGISLATION AND THE CORPORATION SHALL NOT PARTICIPATE OR INTERVENE IN ANY POLITICAL CAMPAIGN (INCLUDING THE PUBLISHING OR DISTRIBUTION OF STATEMENTS) ON BEHALF OF ANY CANDIDATE FOR PUBLIC OFFICE.

0-422-0

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
SECRETARY	DEVORAH WEINMAN	362 HOPE ST PROVIDENCE, RI 02906 USA
DIRECTOR	AARON I BENJAMINSON	525 HOPE ST. PROVIDENCE, RI 02906 USA
DIRECTOR	SCHNEUR ZALMAN LAUFER	362 HOPE ST. PROVIDENCE, RI 02906 USA
DIRECTOR	YISRAEL D BUSH	15 PARK VALE APT 2 BROOKLINE, MA 02446 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

SCHNEUR ZALMAN LAUFER 362 HOPE STREET PROVIDENCE , RI 02906

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

Signed this 29 Day of July, 2016 at 4:02:54 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 SCHNEUR LAUFER
Signature of Authorized Person

Form No. 631
Revised 09/07

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