



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

**Annual Report for the year:** 2016  
**Non-Profit Corporation**

- Filing period: June 1 - June 30
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number <b>121870</b>		2. Exact name of the Corporation <b>National Coalition Of 100 Black Women -Rhode Island</b>			
3. State of Incorporation <b>Rhode Island</b>		4. Brief description of the character of business conducted in Rhode Island <b>Community Service Organization supporting African-American Women</b>			
5. Principal Office Address <b>c/o Sharon Brown 14 Anita Rd</b>			City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>
6. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Armeather Gibbs</b>			Vice-President Name <b>vacant</b>		
Street Address <b>4 Arbor Drive</b>			Street Address		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02908</b>	City	State	Zip
Secretary Name <b>Maria Monteiro</b>			Treasurer Name <b>Sharon Brown</b>		
Street Address <b>218 Home Ave</b>			Street Address <b>14 Anita Rd</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02908</b>	City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>
7. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Adrienne Newsome</b>			Director Name <b>Denise Barge</b>		
Street Address <b>97 Warrington St</b>			Street Address <b>69 Arbor Drive</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02907</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02908</b>
Director Name <b>Joyce O'Connor</b>			Director Name <b>Maria Monteiro</b>		
Street Address <b>105 Gallup St</b>			Street Address <b>218 Home Ave</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02905</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02908</b>
8. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</b>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative <b>Sharon L. Brown/Treasurer</b>				Date <b>2.10.2017</b>	
Signature of Officer/Authorized Representative <i>Sharon L. Brown / Treasurer</i>					

**FILED** *su*

**FEB 13 2017**

BY *2052*

**MAIL TO:**  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov