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R.I. DEPARTMENT OF  
BUSINESS SERVICES DIVISION  
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State of Rhode Island and Providence Plantings  
Department of State - Business Services Division

Annual Report for the year: 2003  
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>0072563</b>		2. Exact name of the Corporation <b>Friends Association of Pawtucket, Inc.</b>	
3. State of Incorporation <b>Rhode Island</b>		4. Brief description of the character of business conducted in Rhode Island <b>Non-Profit Organization</b>	
5. Principal Office Address <b>95 Carpenter Street</b>		City <b>Pawtucket</b>	State <b>RI</b>
		Zip <b>02860</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>Emmanuel Capehart</b>		Vice-President Name <b>Togar Johnson</b>	
Street Address <b>699 Weeden Street</b>		Street Address <b>33 Claremont Street</b>	
City <b>Pawtucket</b>	State <b>RI</b>	City <b>Central Falls</b>	State <b>RI</b>
Zip <b>02860</b>		Zip <b>02863</b>	
Secretary Name <b>Borkai B. Johnson</b>		Treasurer Name <b>Eva Ballah</b>	
Street Address <b>33 1/2 Jane Street</b>		Street Address <b>95 Carpenter Street</b>	
City <b>Pawtucket</b>	State <b>RI</b>	City <b>Pawtucket</b>	State <b>RI</b>
Zip <b>02860</b>		Zip <b>02860</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>David S. Ballah, Jr</b>		Director Name <b>Mangre Attia</b>	
Street Address <b>95 Carpenter Street</b>		Street Address <b>699 Weeden Street</b>	
City <b>Pawtucket</b>	State <b>RI</b>	City <b>Pawtucket</b>	State <b>RI</b>
Zip <b>02860</b>		Zip <b>02860</b>	
Director Name <b>Cephas Logan</b>		Director Name <b>Shirley Johnson</b>	
Street Address <b>217 Harrison Street</b>		Street Address <b>33 1/2 Jane Street</b>	
City <b>Pawtucket</b>	State <b>RI</b>	City <b>Pawtucket</b>	State <b>RI</b>
Zip <b>02860</b>		Zip <b>02860</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>			
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</small>			
Name of Officer/Authorized Representative <b>Borkai B. Johnson</b>			Date <b>11-29-16</b>
Signature of Officer/Authorized Representative <b>Borkai B. Johnson</b> SIGN DOCUMENT HERE			

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

FILED  
APR 06 2017  
By R 300245