RI SOS Filing Number: 201746570590 Date: 6/30/2017 11:47:00 PM



State of Rhode Island and Providence Plantations Office of the Secretary of State

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: 2017

- 1. Corporate ID No. 000085640
- **2.** Name of Corporation <u>ALLEN MINISTRIES ENRICHING NEIGHBORHOODS (A.M.E.N.)</u>, Inc.
- 3. State of Incorporation

State: RI

ARTICLE III

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification click here.

NAICS Code



Fee: \$20.00

813110

4. Corporate Address in Rhode Island

No. and Street: 163 BELLEVUE AVENUE

City or Town: PROVIDENCE State: RI Zip: 02907 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 ENGAGE IN COMMUNITY DEVELOPMENT ACTIVITIES.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	VIOLA PATRICIA MORRIS- BUCHANAN	64 CRAIG ST MILTON, MA 02186 USA
TREASURER	ARTHUR SPEAKS	163 BELLEVUE AVENUE PROVIDENCE, RI 02907 USA
SECRETARY	PAT SPANN	86 ARDOENE ST PROVIDENCE, RI 02907 USA
CHAPLAIN	BASIL BUCHANAN	64 CRAIG ST MILTON, MA 02186 USA
VICE PRESIDENT	BARBARA PAIGE	509 LAUREL HILL AVE CRANSTON, RI 02920 USA
DIRECTOR	NARFRETTE CONNOR	246 OHIO AVE. PROVIDENCE, RI 02905 USA
DIRECTOR	LORINE BIBBS	252 WARRINGTON ST PROVIDENCE, RI 02907 USA
DIRECTOR	C.MAE BUNCH	3595 POST ROAD 16206 WARCIK, RI 02886 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

JAMES C. ALEXANDER 163 BELLEVUE AVENUE PROVIDENCE, RI 02907

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

Signed this 30 Day of June, 2017 at 11:48:55 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 VIOLA MORRIS-BUCHANAN

Signature of Authorized Person

Form No. 631 Revised 09/07

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