



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

**Annual Report for the year: 2017**

**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>82930</b>		2. Exact name of the Corporation <b>The Rhode Island Organizing Project</b>			
3. State of Incorporation <b>Rhode Island</b>		5. Brief description of the character of business conducted in Rhode Island <b>To focus experience, faith perspective, &amp; resources of neighborhood concern.</b>			
4. NAICS Code <b>813319 - Other Social Advocac'</b>					
6. Principal Office Address <b>134 Mathewson Street</b>		City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>	
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>William Flynn</b>		Vice-President Name <b>Bendu Clarke</b>			
Street Address <b>16 Dawes Ave</b>		Street Address <b>79 Alger Ave</b>			
City <b>North Kingstown</b>	State <b>RI</b>	Zip <b>02852</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02907</b>
Secretary Name <b>None</b>		Treasurer Name <b>Luis Pinto</b>			
Street Address		Street Address <b>81 Appleton Street</b>			
City	State	Zip	City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</b>
8. 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>Murray Blackadar</b>		Director Name <b>Abelardo Hernandez</b>			
Street Address <b>100 John Street</b>		Street Address <b>283 Manton Ave</b>			
City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</b>
Director Name <b>Waleska Pinto</b>		Director Name			
Street Address <b>81 Appleton Street</b>		Street Address			
City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</b>	City	State	Zip
9. 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>William Flynn / President</b>				Date <b>7.26.17</b>	
Signature of Officer/Authorized Representative <i>William Flynn, President</i>				<b>FILED</b>	

**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**  
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