



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

Annual Report for the year:

Non-Profit Corporation

2018

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CORPORATIONS DIV

2019 FEB 11 AM 10:19

→ 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 <u>0072963</u>		2. Exact name of the Corporation <u>Friends Association of Pawtucket, Inc.</u>	
3. State of Incorporation <u>Rhode Island</u>		5. Brief description of the character of business conducted in Rhode Island <u>social organization</u>	
4. NAICS Code <u>813319</u>		<u>Volunteer and Assist Community</u>	
6. Principal Office Address <u>95 Carpenter Street</u>		City <u>Pawtucket</u>	State <u>RI</u>
		Zip <u>02860</u>	
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐			
President Name <u>Emmanuel Curtis</u>		Vice-President Name <u>Marion Gbai</u>	
Street Address <u>699 Weeden Street</u>		Street Address <u>42 View Street</u>	
City <u>Pawtucket</u>	State <u>RI</u>	City <u>Providence</u>	State <u>RI</u>
Zip <u>02860</u>		Zip <u></u>	
Secretary Name <u>David S. Ballah</u>		Treasurer Name <u>Eva Ballah</u>	
Street Address <u>95 Carpenter Street</u>		Street Address <u>95 Carpenter Street</u>	
City <u>Pawtucket</u>	State <u>RI</u>	City <u>Pawtucket</u>	State <u>RI</u>
Zip <u>02860</u>		Zip <u>02860</u>	
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment ☐			
Director Name <u>David S. Ballah</u>		Director Name <u>Mangee Afia</u>	
Street Address <u>95 Carpenter Street</u>		Street Address <u>699 Weeden Street</u>	
City <u>Pawtucket</u>	State <u>RI</u>	City <u>Pawtucket</u>	State <u>RI</u>
Zip <u>02860</u>		Zip <u>02860</u>	
Director Name <u>Cephas Logan</u>		Director Name <u>Shirley Johnson</u>	
Street Address <u>217 Harrison Street</u>		Street Address <u>33 1/2 Lane Street</u>	
City <u>Pawtucket</u>	State <u>RI</u>	City <u>Pawtucket</u>	State <u>RI</u>
Zip <u>02860</u>		Zip <u>02860</u>	
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.			
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.			
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.			
Name of Officer/Authorized Representative <u>Emmanuel Curtis</u>		Date <u>2/11/19</u>	
Signature of Officer/Authorized Representative <u>[Signature]</u>		FILED	

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