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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

RECEIVED SECRETARY OF STATE CORPORATIONS DIV

Annual Report for the year: Non-Profit Corporation

2019 APR -8 AM 11: 32

→ Filing period: June 1 - June 30 → Filing Fee: \$20,00 → Penalty: Additional \$25,00 fee if form is مع بران السلط المماكرات

| 3. State of Incorporation RI 4. NAICS Code RISDIG ANAICS CODE RISDIG RISDIG RISDIG ANAICS CODE RISDIG RI | | form is notfiled by July 30. | | | | |
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| 6. Principal Office Address 6. Principal Office Address City State City O2919 7. List ALL Officers (names and addresses) Check the box to indicate an attachment City O2919 7. List ALL Officers (names and addresses) Check the box to indicate an attachment City O2919 Street Address City O2919 Ci | 3. State of Incorporation | 5. Brief description of the character | of business conducted in Rhode | Island | | |
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| 7. LISH ALL Officers (names and addresses) President Name Vice-President Name Vice-Vice-Vice-Vice-Vice-Vice-Vice-Vice- | | | City | State | Zip | |
| President Name Name | | | Charston | 151 | 02919 | |
| Street Address City Wansh Treasurer Name Street Address Street Address Check the box to indicate an attachment of Director Name Director Name Street Address Street Add | | | Check the box to indica | ate an attachment | | |
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| Secretary Name IZ Jackson Treasurer Name IZ Jackson Street Address Street Address City Warruck State IZ JOSS City Street Address Check the box to indicate an attachment Director Name Director Name Street Address Street Address Street Address City State IX JOSA Street Address City Street Address Street Address | Sy though | seam Di | Street Address | | | |
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| Street Address City WWarus State Zip 02875 City Jamos Zip 02974 8. List ALL directors (names and addresses) RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment Director Name Director Name City Can State Street Address Can name City Can State Director Name City Can State Copy City City City City State City City City City State City City City City Street Address City City City Street Address City City City State City City City City 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 Date Signature of Officer/Authorized Representative City City | Liz Jackson | | Treasurer Name | | | |
| 8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment Director Name Director Name Street Address Street Address Cannat Street Address Cannat City Cannat City City City City Street Address Street Address City State Zip Zip Zip Zip Zip Zip Zip Zi | 20 Wels St | | | | | |
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| TILL! | Name of Officer/Authorized Repre | | | 8/15 | | |
| MAIL TO: APR 0.8 2019 11:34 | Signature of Unicer/Authorized Re | epresentative | | ED — | | |
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148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

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