



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

Fee: \$20.00

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:** 2019

**1. Corporate ID No.** 000126371

**2. Name of Corporation** CHABAD OF COLLEGE HILL, 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

6

813110

**4. Corporate Address in Rhode Island**

No. and Street: 12 OLIVE STREET

City or Town: PROVIDENCE

State: RI

Zip: 02906

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 PROMOTE AND SPREAD THE JEWISH RELIGION IN ACCORDANCE WITH THE  
CHASSIDIC TEACHINGS AS SET FORTH BY THE REBBE OF LUBAVITCH

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
TREASURER	MOSHE LAUFER	311 MAPLE AVE BARRINGTON, RI 02806 USA
SECRETARY	CHANA LAUFER	12 OLIVE STREET PROVIDENCE, RI 02906 USA
DIRECTOR	CHANA LAUFER	12 OLIVE STREET PROVIDENCE, RI 02906
PRESIDENT	MENACHEM LAUFER	12 OLIVE STREET PROVIDENCE, RI 02906- USA
VICE PRESIDENT	YISROEL YITZCHOK ZALMANOV	519 RUTLAND RD BROOKLYN, NY 11203 USA
DIRECTOR	MENACHEM M LAUFER	12 OLIVE STREET PROVIDENCE , RI 02906 USA
DIRECTOR	MENACHEM MENDEL BENDET	10 DEBORAH DRIVE MORRISTOWN, NJ 07960 USA
DIRECTOR	MOSHE LAUFER	311 MAPLE AVE BARRINGTON, RI 02806 USA
DIRECTOR	YISROEL YITZCHOK ZALMANOV	519 RUTLAND RD BROOKLYN , NY 11203 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**

MENACHEM LAUFER 12 OLIVE STREET PROVIDENCE , RI 02906

**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 July, 2019 at 8:19:55 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 MENACHEM LAUFER  
Signature of Authorized Person

Form No. 631  
Revised 09/07