S	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00		
HOPE	Division Of Business 148 W. River S Providence RI 0290 (401) 222-304	Services reet 4-2615			
Limited Liability Company Annual Report Filing Period: September 1 - November 1					
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.					
ANNUAL REPORT YEAR: 2019					
1. ID No. 000954605					
2. Exact Name of the Limited Liability Company <u>COMMUNITY OUTREACH GROUP, LLC</u>					
3. State of Formation					
State: DE					
the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.					
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island					
PROVIDES GRASSROOTS ORGANIZING, ADVOCACY AND CANVASSING SERVICES TO AFFILIATED ORGANIZATIONS.					
5. Principal Office Address					
No. and Street: <u>3411 SILVERSIDE ROAD</u> , RODNEY BUILDING #104					
City or Town:WILMINGTONState: DEZip: 19810Country: USA					
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:					
Contact Name: Contact Title:					
No. and Street: <u>PO BOX 96503 #51706</u> City or Town: WASHINGTON State: DC Zin: 20090 Country: USA					
City or Town: WASHINGTON State: DC Zip: 20090 Country: USA 7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS					
Title	Individual Name	Address			
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Coo	de, Country		

MANAGER	PLANNED PARENTHOOD ACTION FUND, INC.	123 WILLIAM STREET NEW YORK, NY 10038 USA
Changes Require Filin CORPORATE CREATION	RHODE ISLAND - DO NOT ALTER ng of Form 642 - R.I.G.L. 7-16-11 ONS NETWORK INC. 10 DORRANCE S executed by an authorized person pure	
signature of the individ acknowledgement of th individual's act and de	he electronic filing, in compliance wi	ment constitutes the affirmation or ry, that this instrument is that y, and that the facts stated herein are
Form No. 632 Revised 09/07		
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