



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:** 2020

**1. Corporate ID No.** 001681946

**2. Name of Corporation** GOOD SAMARITAN ASSOCIATION

**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

813219

**4. Corporate Address in Rhode Island**

No. and Street: 126 BORDEN AVENUE

City or Town: JOHNSTON

State: RI

Zip: 02919

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 HELP MEMBERS OF THE CLUB IN TIME OF SORROW HAPPINESS SUCH A S  
GRADUATION MARRIAGE AND BIRTH OF NEW BABIES AND SO COMMUNITY SERVICE  
DUES COLLECTED WILL BE SHARED AMONG MEMBERS ANNUALLY AND ALL IS USED  
FOR OTHER WORK

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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
PRESIDENT	AUGUSTINE SATU	126 BORDEN AVENUE JOHNSTON, RI 02919 USA
TREASURER	EMMA STEWART	46 GRAY PROVIDENCE, RI 02909 US
VICE PRESIDENT	BEATRICE DORLEY	14 LEE AVE NORTH PROVIDENCE, RI 02904 US
DIRECTOR	HAWA K. MIAMEN	126 BOWDOIN STREET PROVIDENCE, RI 02909 USA
DIRECTOR	RUT UREY	37 GLENHAM ST PROVIDENCE, RI 02907 US
DIRECTOR	TRACY TAHYOR	126 BORDEN AVE JOHNSTON, RI 02919 US
DIRECTOR	TROKON KAIBIAR	296 CHAD BROWN ST PROVIDENCE, RI 02908 US

**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**

AUGUSTINE SATU 126 BORDEN AVENUE JOHNSTON , RI 02919

**9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.**

**Signed this 22 Day of June, 2020 at 4:27:33 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 AUGUSTINE SATU  
Signature of Authorized Person

Form No. 631  
Revised 09/07