



Department of State - Business Services Division

Annual Report for the year: **2019**

Non-Profit Corporation

→ Filing period: June 1 - June 30

→ Filing Fee \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV

2020 AUG 14 PM 4:15

1. Entity ID Number 000115586		2. Exact name of the Corporation Bitter Fruit Productions, Inc.	
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island Film production and distribution of the documentary: American Lynching: Strange and Bitter Fruit	
4. NAICS Code 512110			
6. Principal Office Address 10 St. George St., West Warwick, RI 02893		City West Warwick	State RI Zip 02893
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Gregory S. Davis		Vice-President Name Gode Davis	
Street Address 10 St. George Street		Street Address 10 St. George Street	
City West Warwick	State RI	City West Warwick	State RI Zip 02893
Secretary Name Alf Wilson		Treasurer Name	
Street Address 39 Pleasant Street		Street Address	
City Marblehead	State MA	City	State Zip
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>			
Director Name Gregory S. Davis		Director Name Gode Davis	
Street Address 10 St. George Street		Street Address 10 St. George Street	
City West Warwick	State RI	City West Warwick	State RI Zip 02893
Director Name Alf Wilson		Director Name	
Street Address 39 Pleasant Street		Street Address	
City Marblehead	State MA	City	State Zip
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 Gregory S. Davis		Date 7/31/20	
Signature of Officer/Authorized Representative <i>Gregory S. Davis</i>		SIGN DOCUMENT HERE FILED	