

(FORM MUST BE TYPED OR PRINTED IN BLACK)

FOR SECRETARY OF STATE USE ONLY

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

Form 631 Rev. 6/02

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005 Filing Period: June 1 - June 30 • Filing Fee: \$20.00

1. Corporate ID No.	2. Name of Corporation				
99785	<u> </u>	Association of Rhode			
3. State of Incorporation	į	Rhode Island -Street Addre	55	City	74p 01988-0149
RHODE ISLAND	PO BOX 28142			PROVIDENCE	· 00000
5. Foreign corporation: Enter prin	ncipal office address		City	State	Zip
			L		
6. Brief Description of the charact	er of the affairs which are	actually conducted in Rho	ode Island		
CULTURAL & HISTORICAL	L PRESERVATION				
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7. NAMES AND ADDRESSI President Name	ES OF THE OFFICE	S ("X" BOX FOR ATTA	CHMENT) DIFFILL IN SPACES	BEFORE USING ATTA	CHMENTS : PERSON
0 - 1/	TS/AN		Vice President Name DER A	POORIAN	
CORINNE HED!	2017410		Sireel Address	000111110	
9 PRANCETTS	POWET		. ,,	ROAD	
City	State	Zip	Ciry,	State	Zip
NAMANGA report	til decen	ed	NARRAGANSETT	RI	02882
Secretary Name		-1	Treasurer Name	· · · · · · · · · · · · · · · · · · ·	
GAIL BILE	ZERIAN		EDWARD ER	ANOSIAN	
Street Address			Street Address	0.00	
28 WINCH		1E	· 156 VELLW	OOP ROAD	
City	State 0 T	Zip 02896	City 1	State A +	Zip 7.971
NORTH SMITHFIELD	D RI	01076	: CRANGTON	/	02120
8 NAMES AND ADDRESSI	ES OF THE DIRECT	The Rid County See William St. 1978, Process	とっく かっしん かったいてこん さい せいけつ あい いかいり	S BEFORE USING AT	IACHMENTS
THE NUMBER OF DI	RECTORS OF A DOME	STIC (RHODE (ISLAND)	CORPORATION SHALL NOT B	ELESS THAN THREE	(3).R.I.G.L.7-6-23
Director Name			, Director Name	_	,
GEORGE CH	AKOFAN	<u></u>	: KAMON LO	RABEDIA.	$\mathcal{V}_{}$
Street Address	\mathcal{D}_{α}		Street Address	Davis	
11 SOUTHW	ICK VRII) E-	:40 HAMILTO	N DRIVE	
City	State 10 +	Zip A TOA 6	·City	State 0 +	Zip
LINCOLN	J., K	02905	EAST GREENWICH	1	07010
Director Name	KARENT	フ	· Director Name	ATIAN/	į
Street Address	THEIOT		· JOHN FTHE OF	0171110	
TWO CLARKE	E VILLAGE	/ DA SE	ONE PONCIDER	CE WASHING	STAN RAZA
City.	State	Zip	City	State	7.ip 1.41.2.F]
JAMESTOW N	Rエ	02835	PROVIDENCE	RI	02903
No. 13 reference of the first contract of th	RHODE ISEAND	NOTALTER Chan	ges require filing of For	m 641 skileti 7.618	1016181
Agent Name	CALL - FIL - CALLON LANDS AND AND ALLONDON		Address		
SANDRA M	ATRANE 1	MACK SEC.	HASLAW, L ROVIDENCE	LC	
Address	2	1111	City	Zip	_
1500 FLEE	T CENTER	<i>. p</i>	BALLOE ALCE	RT O.	2903
This report must be signed	l in ink by either th	e President, Vice Pre	sident, Secretary, Assistant	Secretary, Treasure	r, Receiver or Trustee
IE IEIIE IEIII II	1831 (1)81 811				
	BBBI IBIAI BII ' 8 5		Under penalty of perjury,	I declare and affirm tha	it I have examined
, , ,			this report, including any		
*00705 DND 05/00/05 0	1.50:10 DM		and that all statements cor		
*99785 DNP 05/20/05 0			α	0	71/1/2
File Date / -/ 5 -	~~ 1.16.05		To ward	Esualian	1 1/1/105
Check No. 1/4			Signature of Officer	Da	le (===
Check No.	<u> </u>		EDWARD	CRANOSIA	4N



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State

(FORM MUST BE TYPED OR PRINTED IN BIACK)

Corporations Division 100 North Main Street Providence, RI 02903-1335 401.222.3040

NON-PROFIT CORPO	OR.	ATION	ANNUAL	REPORT	FOR	THE	YEAR
Filing Period: June 1 - June 30							

2004

1. Corporate ID No.	2 Name of Corporation					
99785	Armenian Historical Association of Rhode	Island				
3. State of Incorporation	4 Corporate address in Rhode Island - Street	Address	City	Zip		
RHODE ISLAND	1 P.O. BOX 281	42	PROVIDENCE	02908-0145		
5 Foreign corporation. Enter		City	State	Zip		
		·		· · · ·		
6 Brief Description of the chara	cter of the affairs which are actually conducted in R	thode Island				
CULTURAL & HISTOR						
7. NAMES AND ADDRES	SES OF THE OFFICERS: ("X" BOX FOR A	TTACHMENT) 📋 FILL IN SPACE	S BEFORE USING ATTA	CHMENTS		
President Name	// -	Vice President Name				
CORINNE	HEDITSIAN	HRAM DER	HRAM DECADOORIAN			
Street Address	.	Street Address	0			
	T COURT	46 MIDDLE	KOAD			
City Anna An are	7 State RI 21102883	City	- State R.I	02882		
WARRAGANSE	1 1 00010	WARK AGAN SET	<u> </u>	02882		
Secretary Name 2		Treasurer Name		,		
GAIL BILE	ZERIAN	EDWARD A	ERANOSIAN	<u>/</u>		
28 WINCHES	ITER AVE	Street Address	WOOD ROAD	_		
			-WOOV KOKI	· 		
NORTH SMITHFIEL	P State RI 210 0289	6 CRANSTON	State R T	02920		
S NAMES AND ADDRES			/\	١٠ .		
THE NUMBER OF BURE		ATTACHMENT) FILL IN SPACE		CHMENTS		
THE NUMBER OF DIRE	CTORS OF A DOMESTIC (RHODE ISLA	1	<u>OT BE LESS THAN THRE</u>	EE (3). R.I.G.L. 7-6-23		
CEAR E	CHAKOLAN	Director Name	ABEDIAN			
Street Address	CHAROTATE	7,7,7,7,7	CHOCVIIIO			
11 SOUTH	WICK DRIVE	Sirou Address	ON DRIVE			
	··	40 HAMILT				
LINCOLW	State RI 210 290	S Canadian	E State AI	02818		
_	0-10	- Ellist direction to the	F \ \1-	0 2-6 16		
Director Name I/ARDID.TA	N KARENTZ	Director Name	POOTIAN			
Street Address	7 / / / / 2/0 / 24		POOTINO			
TWO CLARK	E VILLAGE LANE	Street Address	ing the outstan	PLAZA		
City	State Zip		ICE WASHINGTON	- i -		
JAMESTOWN	RT 02833	- PROVIDENCE	State RI	02903		
	IN RHODE ISLAND - DO NOT ALTER -	Changes require filing of Fore	n 641 PIGL 7613	77679		
Agent Name		Address	ш 041 - К.І.О.І,, 7-0-15 /	7-0-78		
SANDRA MATRONE MAC	K SEC.	HASLAW, LLC				
Address	.,,		T			
1500 FLEET CENTER		Gily:	Zip	•••		
		PROVIDENCE	02	903		
This report must	be signed in ink by either the President,	Vice President, Secretary, Assista	int Secretary, Treasurer, F	Receiver or Trustee		
	3 (50) (55) (50)		,, 			
		•				
	#					

Under penalty of perjury, I declare and affirm that I have examined this

	*	9	9	7	8	5	*
File Date		11	0	1_			
Check No		11	59				
Ву:		<u>D</u> f	}				
FO	R SECRE	TARY (OF STAT	TE USE	ONLY		1

report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

EDWARD ERANOSIAN



FOR SECRETARY OF STATE USE ONLY

STATE OF RHODE ISLAND

Matthew A. Brown, Secretary of State Corporations Division

AND PROV	IDENCE PLANTA ceretary of State	ΓΙΘΝS		100 North Main Stree	es, Providence, RI 02903-13. 401.222.30
iling Period: June 1 - J	une 30 • Filing F	ON ANNUAL 1 ee: \$20.00	REPORT FOR TH	IE YEAR	2003
ORM MUST BE TYPED OR I Corporate ID No.	2. Name of Corporation	. 			
99785	1 .	ssociation of Rhode Island			
State of Incorporation	4. Corporate address in	Rhode Island - Street Addr	rss	City	Zip
RHODE ISLAND	سي شعا	X 28142	. •	PAOVIDENC	1 '
Foreign corporation. Enter pr	incipal office address	<u> </u>	City	State	Zip
Brief Description of the character CULTURAL & HISTORICAL		e actually conducted in Rho	de Island.		
NAMES AND ADDRESSE resident Name CORINNE H	,		HMENT) TILL IN SPACES Vice President Name PAAM DER	BEFORE USING AT	TACHMENTS
PROSPEC			Sireei Address 46 MIDDLE	ROAD	
ⁱⁿ Waraagansett	State RI	03882	City NARRAGANSETT	State	2ip 02882
	ZERIAN		Treasurer Name EDWARD E.	AANOS IA	ν <u> </u>
reet Address 28 WINCIHE			Street Address DELLW		
JORTH SMITHFIELD	State	02896	CAANSTON	State 19 I	0297D
NAMES AND ADDRESSE THE NUMBER OF DIREC- irector Name	S OF THE DIRECTOR CTORS OF A DOMES	S ("X" BOX FOR ATTAC TIC (RHODE ISLAND)	CHMENT) TELL IN THE SPACE CORPORATION SHALL NOT	CES BEFORE USIN BE LESS THAN TH	IG ATTACHMENTS REE (3). R.I.G.L. 7-6-23
	KOIAN		Director Name RAMON ZOI Street Address	RABEDIAN	
11 SOUTHWICE	Siale	12:-	40 / AMILT		
LINCO AN	SI RI	07905	City EAST GREENWICK	State R T	028/8
VAROUJAN	KARENTZ		Director Name JOHN HAI	· · · · · · · · · · · · · · · · · · ·	
TWO CLARKE	VILLAGE LA	NE Zip	DNE PROVID	ENCE WASH	HINGTON PLAZA
JAMESTOWN	<u> </u>	02835	CITY PROVIDENCE		02903
gent Name	KHUDE ISLANU - DO	O NOT ALTER - Chang	es require filling of Form 641	- R.I.G.L. 7-6-13 / 7-6	5-78
SANDRA MATRONE MACK, ddress	SEC.		HASLAW, LLC	Zip	······································
1500 FLEET CENTER		-	PROVIDENCE		02903
iis report must be s <mark>igne</mark> d	l in ink by either the	President, Vice Pres	ident, Secretary, Assistant S	Secretary, Treasure	r, Receiver or Trustee
* 9	9 7 8 5		Under penalty of perjury, I this report, including any a	ecompanying schedule	es and statements,
9-12	-113		and that all statements con	tained herein are true a	nd correct.

Edward Camarian 6/15/03
Signature of Officer

EDWARD ERANOS TAN

Print or Type Name of Officer Form 631 Rev. 6/02

Filing Fee: \$20.00

To be filed annually during the month of June



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

NON-PROFIT CORPORATION

NON	IT NOT IT CORPORATION			
Corporate ID Number <u>DNP-99785</u>	Annual Report for the year 2002			
1. The name of the corporation is <u>Armeni</u>	ian Historical Association of Rhode Island			
The state or other jurisdiction under the	laws of which it is incorporated is RHODE ISLAND			
 The address of the registered office of the PROVIDENCE, RI 02903 	the corporation in this state is HASLAW, LLC 1500 FLEET CENTER			
and the name of its registered agent in	this state at that address is SANDRA MATRONE MACK, SEC.			
4. The character of the affairs which it is a	ctually conducting in Rhode Island いにははなれば。 H ISTORIC PRESERVATION			
	If a foreign corporation, the address of its principal office in the state or other jurisdiction under the laws of which it is			
6. Corporate address in Rhode Island/	P.O. BOX 28142 PROVIDENCE RI			
	02908			
 Names and addresses of its directors at number of directors of a domestic (Rhod 	nd officers: (In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the de Island) corporation shall not be less than three (3).)			
NAME OFFICE	ADDRESS			
SONDRA PITTS Director	185 DAKLAND AVE. CRANSTON BI 07910			
VAROUJAN KARENTZ Director	2 CLARK VILLAGE LANE JAMESTOWN RT 02835			
RAMON ZORABEDIANDirector	40 HAMILTON DA. EAST GREEN WICH RI 028			
RINNE HEDITSIAN President	9 PROSPECT COURT BARRAGANSETT RT 028			
RAM DERADORTAN Vice-Presid				
AIL BILEZERIAN Secretary	18 WINCHESTER AVE. NO. SMITHHELD RI			
DWAND ERANOSIAN Treasurer	156 DELLWOOD ROAD CAANSTON RI 029;			
Dated: June 10, 2002	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.			
	AMENIAN HISTORICAL ASSOCIATION OF Exact Name of Corporation RHODE ISLA			
FOR SECRETARY OF STATE USE ONLY	By_ Edward Eromasin			
10-17-10	7			
le Date:	Title			
neck No.:	Form No. 631			
i — Cle	Revised 5/98			

Filing Fee: \$20.00

To be filed annually during the month of June

Ravisad 5/98



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

	NON-PI	ROFIT CORPORATION			
Со	rporate ID Number <u>DNP-99785</u>	Annual Report for the year 2001			
1.	The name of the corporation is Armenian H	listorical Association of Rhode Island			
2 .	The state or other jurisdiction under the laws	of which it is incorporated is RHODE ISLAND			
3.	The address of the registered office of the open PROVIDENCE, RI 02903	corporation in this state is HASLAW, LLC 1500 FLEET CENTER			
	and the name of its registered agent in this	state at that address is SANDRA MATRONE MACK, SEC.			
4.		CULTURAL & HISTORIC PRESERVATION			
5	incorporated is	incipal office in the state or other jurisdiction under the laws of which it is			
6.	Corporate address in Rhode Island	O. BOX 28142 PROVIDENCE RI 02908			
7.		fficers: (In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the cland) corporation shall not be less than three (3).)			
	NAME OFFICE	ADDRESS			
<u>S</u>	PONDRA PITTS Director TOHN VARADIAN Director AMON ZORABEDIAN Director	185 DAKLAND AVE. CRANSTON RI 185 SHAW AVE. CRANSTON RI 40 HAMILTON DR. ERST GREENWICH RI			
_	AROU JAN KARENTE resident	1 CLARKE VILLAGE JAMESTOWN RI 9 PROSPECT COURT NARAGANSETT RI			
	AIL BILEZERIAN Secretary	28 WINCHESTER AVE. NO. SMITHFIELD RI			
E	WARD ERANOSIAM reasurer	156 DELLWOOD ROAD CRANSTON AI			
Da	tod: June 14, 2001	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.			
	AA,	MENIAN HISTORICAL ASSOCIATION OF ISLAND			
1	* 9 9 7 8 5 * FOR SECRETARY OF STATE USE ONLY	By Sward Causian			
ile	Date:	Title TREASURER			
Chec	ck No.: / 6 7 /	(Report must be signed by an officer)			
~		Form No. d31			

Filing Fee: \$20.00

To be filed annually during the month of June



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

	NON-P	ROFII CORPORATION
Со	rporate ID Number <u>DNP-99785</u>	Annual Report for the year 2000
1.	The name of the corporation is Armenian	Historical Association of Rhode Island
2.		vs of which it is incorporated is RHODE ISLAND
3.	PROVIDENCE, RI 02903	corporation in this state is HASLAW, LLC 1500 FLEET CENTER
		state at that address is SANDRA MATRONE MACK, SEC
4.	The character of the affairs which it is actu	ally conducting in Rhode Island, briefly stated, is #### HISTORIC PRESENATION
5		orincipal office in the state or other jurisdiction under the laws of which it is
6.	Corporate address in Rhode Island	P.O. BOX 28141 PROVIDENCE RI 02908
7.	number of directors of a domestic (Rhode I	officers: (In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the Island) corporation shall not be less than three (3).) ADDRESS
	SONDRA PITTS Director	185 CAKLAND AVE. ERANSTON RI
$\overline{}$	TOHN L'ARADIAN Director	185 SHAW AUE. CRANSTEN RI
	AMON LORABEDIAN Director	40 HAMILTON DR. EAST GREENWRIT RL
ر ب	AROUTAN KARENTZPresident OAINNE HEDITSIAN Vice-Presiden	1 - 9 PROSPECT COURT NARLAGANSETT RI
	EPHANE MES KOBIAN Secretary	141 OLIVEY AVE, ABATH PROVIDENCE RI
	WARD ERANGS HAN Treasurer	156 DELLWOOD ROAD CRANSTON RE
Dat	red: Jame 16, Love	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.
		ARMENUAN HISTORICAL ASSECTATION OF RI
F	OR SECRETARY OF STATE USE ONLY	By Edward Emession
	Date:4/27	
	105-2	Title TREASURER (Report must be signed by an officer)
nec	k No.:	Form No. 631

.Filing Fee: \$20.00

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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

NON-	PROFIT CORPORATION
Corporate ID Number ND-99785	Annual Report for the year 1999
1. The name of the corporation is Armenia	•
	aws of which it is incorporated is Rhode Island he corporation in this state is HASLAW, LLC 1500 FLEET CENTER
PROVIDENCE, RI 02903	
	his state at that address is SANDRA MATRONE MACK, SEC
4. The character of the affairs which it is ac	tually conducting in Rhode Island, briefly stated, is
5 If a foreign corporation, the address of its incorporated is	s principal office in the state or other jurisdiction under the laws of which it is
Corporate address in Rhode Island	P.U BOX 28142 Providence
number of directors of a domestic (Rhode	d officers: (In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the e Island) corporation shall not be less than three (3).)
NAME OFFICE	ADDRESS
Sonder Pitts Director	185 OAK lard Ave CRANSTON
Director Director	185 Show Aux Crawston
NAKULIAN KARANTZ President	2 Clarke William Clark
ORINM Heditsian Vice-Preside	int 9 PRINCE CF NAMES AND TOWN
Secretary	141 Comby N. Providence
dward Enanusian Treasurer	156 Dedwood Charton
Dated: 21 June 99	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.
	HRMENIAN HISTORIAL ASSUCIATION of RIT
FOR SECRETARY OF STATE USE ONLY File Date:	By James Land
Check No.: 608	Title Chauman
By:	(Report must be signed by an officer)
J	Form No. NP-13