



**State of Rhode Island  
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:** 2021

**1. Corporate ID No.** 001256291

**2. Name of Corporation** WOMEN'S REFUGEE CARE WRC

**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



813319

**4. Principal Office Address**

No. and Street: 570 BROAD STREET

SUITE 103

City or Town: PROVIDENCE

State: RI

Zip: 02907

Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:

City or Town: State: Zip: Country:

**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**

PROMOTE GENDER EQUALITY AND EMPOWER FELLOW REFUGEES AND IMMIGRANTS  
IN THE UNITED STATES

**6. Names and Addresses of the Officers and Directors:**

**All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island**

Corporation shall not be less than 3.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	DAVID WEITZ	32 ELMGROVE PROVIDENCE, RI 02906 USA
DIRECTOR	LINFORD FISHER	132 ARNOLD AVE CRANSTON, RI 02905 USA
PRESIDENT	MARY ELLEN LYNCH	11 KILBURN NEWPORT , RI 02840 USA
VICE PRESIDENT	KEITH COOPER	GOVERNOR STREET PROVIDENCE, RI 02906 USA
DIRECTOR	JACK RITCHER	48 LAUREL AVE PROVIDENCE, RI 02906 USA
DIRECTOR	KIHONGA MUSAFIRI	59 DARTMOUTH AVE PROVIDENCE, RI 02907 USA
CO-FOUNDER DIRECTOR	ALINE BINYUNGU NZIGIRE	14 GALLUP STREET PROVIDENCE, RI 02905 USA
CO-FOUNDER DIRECTOR	CLEMENT SHABANI	14 GALLUP STREET PROVIDENCE, RI 02905 USA
DIRECTOR	CHUKA OKOYE	309 HUXLEY AVE PROVIDENCE, RI 02908 USA
DIRECTOR	MATTHIEU LUKUSA	3037 PAWTUCKET AVE RIVERSIDE, RI 02915 USA

**7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER**  
**Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

ALINE BINYUNGU NZIAIRE 1408 BROAD STREET, 1FL PROVIDENCE , RI 02905

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

**Signed this 16 Day of July, 2021 at 10:15:27 AM 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 ALINE BINYUNGU  
Signature of Authorized Person

Form No. 631  
Revised 09/07