



**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: February 1 - May 1

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: 2022

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

4. Principal Office Address

No. and Street: 126 BORDEN AVE
City or Town: JOHNSTON State: RI Zip: 02919 Country: USA

5. Brief Description of the Character of the Affairs 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

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

PRESIDENT	AUGUSTINE SATU	126 BORDEN AVENUE JOHNSTON, RI 02919 USA
PRESIDENT	AUGUSTINE SATU	182 STERLING AVE 2 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	BERNIE SUMO	46 GRAY STREET PROVIDENCE, RI 02909 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**

AUGUSTINE SATU 126 BORDEN AVENUE JOHNSTON , RI 02919

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

Signed this 21 Day of June, 2022 at 4:11:08 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

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