

## 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 - ENTER THE CURRENT YEAR **2025**: <u>2025</u>

- **1. Corporate ID No.** 001720478
- 2. Name of Corporation Next Generation & Futures
- 3. State of Incorporation

State: RI

#### **NAICS CODE**

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 <u>click here.</u>

**NAICS** Code

<u>624110</u>

#### 4. Principal Office Address

No. and Street: 25 BOUGH STREET

City or Town: PROVIDENCE State: RI Zip: 02909 Country: USA

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

NEXT GENERATION & FUTURES IS DEDICATED TO UNDERSERVED YOUTH AND COMMUNITIES WITH A HOLISTIC FOCUS ACROSS MIND, BODY AND SOUL THROUGH COMMUNITY CONNECTION AND COLLABORATION TO DELIVER INFORMATION, KNOWLEDGE AND EDUCATION ACROSS FINANCIAL LITERACY, ENTREPRENEURSHIP, INNOVATION, CAREER & SELF AWARENESS, S.T.E.A.M (SCIENCE TECHNOLOGY ENGINEERING ARTS & MATHEMATICS, HEALTH AND WELLNESS COMBINING FOCUS ON YOUTH SPORTS AND ATHLETICS TO SUPPORT THE NEXT GENERATION IN AN INCREASINGLY GLOBAL WORKFORCE. OUR GOAL

### IS TO TRANSFORM LIVES AND OUTCOMES ACROSS EDUCATION, LITERACY AND HEALTH.

#### 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	FAROUK AJAKAIYE	PO BOX 5895 PROVIDENCE, RI 02909 USA
DIRECTOR	NAOMI GARCIA	153 WEST BOLYSTON WEST BOLYSTON, MA 01583 USA
DIRECTOR	FAROUK AJAKAIYE	PO BOX 5895 PROVIDENCE, RI 02903 USA
DIRECTOR	IDREES O AJAKAIYE	PO BOX 5895 PROVIDENCE, RI 02903 USA
DIRECTOR	ROSANNY BOURDIERD	PO BOX 10054 CRANSTON, RI 02910 USA
DIRECTOR	NUSIRAT HASAAN	6 ESTEY STREET ROXBURY, MA 02120 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

IDREES AJAKAIYE 25 BOUGH STREET PROVIDENCE, RI 02909

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

**Signed this 17 Day of December, 2024 at 11:59:22 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 FAROUK AJAKAIYE

Signature of Authorized Person

Form No. 631 Revised 09/07