



State of Rhode Island  
Department of State - Business Services Division

REC'D: SOS ASD  
15 MAR 2025 PM 12:46:00

Annual Report for the year: 2025  
Non-Profit Corporation

- Filing period: February 1 - May 1  
→ Filing Fee: \$20.00  
→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number <u>1677930</u>		2. Exact name of the Corporation <u>RHODE ISLAND TAMIL SAMITHAM</u>	
3. State of Incorporation <u>RI</u>		5. Brief description of the character of business conducted in Rhode Island <u>OUR CHARACTER INCLUDE ACTIVITIES TO HELP PROMOTE TAMIL LANGUAGE AND CULTURE, ORGANIZE EVENTS LIKE MUSIC, MOVIE, DANCE &amp; DRAMA. ENCOURAGE LOCAL TALENTS IN AND AROUND RI</u>	
4. NAICS Code <u>813319</u>			
6. Principal Office Address <u>455 MESHANTICUT VALLEY PKWY APT 212</u>		City <u>CRANSTON</u>	State <u>RI</u>
		Zip <u>02920</u>	
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <u>IDA MERLIN RAJAKUMAR</u>		Vice-President Name	
Street Address <u>455 MESHANTICUT VALLEY PKWY APT 212</u>		Street Address	
City <u>CRANSTON</u>	State <u>RI</u>	City	State
Zip <u>02920</u>		Zip	
Secretary Name <u>KUMARAVEL UMAPATHY</u>		Treasurer Name <u>VIJAYAKUMAR SABAPATHY</u>	
Street Address <u>340 HIGH STREET CUMBERLAND</u>		Street Address <u>20 CADORET DRIVE</u>	
City <u>CUMBERLAND</u>	State <u>RI</u>	City <u>CUMBERLAND</u>	State <u>RI</u>
Zip <u>02864</u>		Zip <u>02864</u>	
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name <u>SEE ATTACHMENT</u>		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.			
<b>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.</b>			
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</small>			
Name of Officer/Authorized Representative <u>IDA MERLIN RAJAKUMAR</u>			Date <u>03/03/25</u>
Signature of Officer/Authorized Representative <u>R. Rajakumar</u>			

MAIL TO:  
Division of Business Services  
148 W River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: www.sos.ri.gov

FILED

MAR 03 2025  
BY KL 49H3W

### Rhode Island Tamil Sangam - Board of Directors

Role	Name	Address
President	Mrs. Ida Merlin Rajakumar	455, Meshanticut Valley Pkwy, Apt 212, Cranston, RI-02920
Secretary	Mr. Kumaravel Umapathy	340 High street Cumberland 02864
Treasurer	Mr. Vijaykumar Sabapathy	20 Cadoret Drive Cumberland RI 02864
Joint Treasurer	Mrs. Unnamalai Murugappan	25 ballou street, Cumberland, Rhode Island 02864
Director	Mr. Sajeenthiran Kanagaratnam	177 South Bend St., Pawtucket RI 02860
Director	Mr. Ezhilmaran Swaminathan	3226 Pawtucket Ave, Apt13, Riverside, RI 02915
Director	Mr. Odi Odayappan	14 Stratton Road, Mansfield, MA 02048