State of Rhode Island Fee: \$20.00 Office of the Secretary of State Office of the Secretary of State			
Division Of Business Services 148 W. River Street			
Providence RI 02904-2615			
1636 (401) 222-3040			
Non-Profit Corporation			
Annual Report Filing Period: February 1 - May 1			
In accordance with RICL 76.04, each corporation failing or refusing to file its			
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: 2025			
1. Corporate ID No. 000123883			
2. Name of Corporation Watlao Xoke Xayyaram Buddhist Temple			
3. State of Incorporation			
State: <u>RI</u>			
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>813110</u>			
4. Principal Office Address			
No. and Street: 458 RIVER ST			
City or Town:WOONSOCKETState: RIZip: 02895Country: USA			
5. Brief Description of the Character of the Affairs Conducted in Rhode Island			
SAID ORGANIZATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS,			
EDUCATIONAL, AND SCIENTIFIC PURPOSES, INCLUDING, FOR SUCH PURPOSES,			
THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS			
EXEMPT ORGANIZATIONS UNDER SECTION 501 (C)(3) OF THE INTERNAL REVENUE			
CODE, OR CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE.			
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	MAX CHANTHARATH	76 BURLINGAME ROAD SMITHFIELD, RI 02917 USA
TREASURER	VANE CHOMPHRANOUVONG	339 EAST SCHOOL STREET WOONSOCKET, RI 02895 USA
SECRETARY	PIN MANIVONG	72 REGENT AVE PROVIDENCE, RI 02908 USA
VICE PRESIDENT	SIDA INTHASANE	498 THIRD AVE WOONSOCKET, RI 02895 USA
DIRECTOR	VICHITH PHOMMARATH	11 FAIR ST PROVIDENCE, RI 02908 USA
DIRECTOR	MYPHET PHOMMARATH	287 AMHERST ST PROVIDENCE, RI 02909 USA
DIRECTOR	SYVONE VORABOUT	81 FARM ST PROVIDENCE, RI 02908 USA
DIRECTOR	BOUNTIEN KEOBANDITH	14 SUFFOLK ST PROVIDENCE , RI 02908 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

VANE CHOMPHRAVOUVONG 458 RIVER ST WOONSOCKET, RI 02895

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

Signed this 10 Day of April, 2025 at 11:14:24 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 VANE CHOMPHRANOUVONG

Signature of Authorized Person

Form No. 631 Revised 09/07

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