



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: **2023**

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.

REC'D RIDOS BSD  
25 APR 17 AM 9:46:22

1. Entity ID Number <b>001738151</b>		2. Exact name of the Corporation <b>Rhode Island Community Khayr</b>	
3. State of Incorporation <b>Rhode Island</b>		5. Brief description of the character of business conducted in Rhode Island <b>RHODE ISLAND COMMUNITY KHAYR IS A FAITH-BASED ORGANIZATION SERVING THE CHARITABLE NEEDS, EDUCATIONAL, RELIGIOUS, MENTAL HEALTH NEEDS in RHODE ISLAND.</b>	
4. NAICS Code <b>624190</b>			
6. Principal Office Address <b>39 Haskins Street</b>		City <b>Providence</b>	State <b>RI</b>
		Zip <b>02903</b>	
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <b>MRS. Noor Memon</b>		Vice-President Name <b>MS. SAIRA I QURESHI</b>	
Street Address <b>1 Monarch Way</b>		Street Address <b>42 Nicholas Dr.</b>	
City <b>Lincoln</b>	State <b>RI</b>	City <b>Attleboro</b>	State <b>MA</b>
Zip <b>02865</b>		Zip <b>02103</b>	
Secretary Name <b>CHELSEA PANZARELLA</b>		Treasurer Name <b>MRS. NAZNEEN PUTHWALA</b>	
Street Address <b>2122 WARWICK AVE APT 306C</b>		Street Address <b>5 White Horse Road</b>	
City <b>Warwick</b>	State <b>RI</b>	City <b>Lincoln</b>	State <b>RI</b>
Zip <b>02889</b>		Zip <b>02865</b>	
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 <b>ASMA SHEIKH</b>		Director Name <b>Nasima Mohammed</b>	
Street Address <b>19 Nathaniel Green Dr.</b>		Street Address <b>76 French Drive</b>	
City <b>East Greenwich</b>	State <b>RI</b>	City <b>Pawtucket</b>	State <b>RI</b>
Zip <b>02818</b>		Zip <b>02860</b>	
Director Name <b>Katherine Wilson</b>		Director Name	
Street Address <b>19 Shirley Blvd.</b>		Street Address	
City <b>Cranston</b>	State <b>RI</b>	City	State
Zip <b>02910</b>		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>			
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>			
Name of Officer/Authorized Representative <b>Asma Sheikh Director</b>			Date <b>04/12/2025</b>
Signature of Officer/Authorized Representative 			

FILED

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

APR 17 2025  
BY AA  
9:47 AM