



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2013
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
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1. Entity ID Number 000092327		2. Exact name of the Corporation ITEBU DESCENDANTS ASSOCIATION OF RI, WA, INC	
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island NON PROFIT organization for for NATIVES OF ITEBU SONS & DAUGHTERS	
4. NAICS Code 813319			
6. Principal Office Address 70 CALLA ST		City Providence	State RI
		Zip 02905	
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☒			
President Name JOSIAH OLABOYE BADEJO		Vice-President Name CHRISTOPHER OSINAGA	
Street Address 15 VAN-AUSDALL ST		Street Address 32 STEUBEN ST	
City Providence	State RI	City Providence	State RI
Zip 02905		Zip 02905	
Secretary Name Idowu Kuti		Treasurer Name ABISDUN HASSAN	
Street Address 70 CALLA ST		Street Address 17 GARNER AVE	
City Providence	State RI	City North Providence	State RI
Zip 02905		Zip 02911	
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment ☐			
Director Name JOSIAH OLABOYE BADEJO		Director Name CHRISTOPHER OSINAGA	
Street Address 15 VAN-AUSDALL ST		Street Address 32 STEUBEN ST	
City Providence	State RI	City Providence	State RI
Zip 02909		Zip 02909	
Director Name Idowu Kuti		Director Name ABISDUN HASSAN	
Street Address 70 CALLA ST		Street Address 17 GARNER AVE	
City Providence	State RI	City North Providence	State RI
Zip 02905		Zip 02911	
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.			
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.			
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.			
Name of Officer/Authorized Representative OLUROTIMI OLUGBOYE		Date 8/25/2025	
Signature of Officer/Authorized Representative 			

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

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FORM 631- Revised. 12/2023



BY EBP90

SECTION 7: ADDITIONAL OFFICERS

<u>TITLE</u>	<u>NAME</u>	<u>ADDRESS</u>
2nd VICE President	Bala AMOSIKA	252 Dugley st Providence RI 02907
Financial Secretary	TAYO OSINAJA	72 Samoset st Providence RI 02908
PRO	— Ali ADELAJA	— 28 Lee st Johnston RI 02919.
Social Secretary	- Lekana Abugade	4 Henrici st Mattapan, Boston MA 02126