

**NON-PROFIT
ANNUAL CORPORATION REPORT**

**Filing Fee: \$10 (Make check payable to: CNMI Treasury)
File original and Two copies.**

FILING: THE INITIAL REPORT MUST BE FILED WITHIN 60 DAYS OF
INCORPORATION. THE ANNUAL REPORT MUST BE FILED
ON OR BEFORE MARCH 1ST OF EACH YEAR.

FILE WITH: Registrar of Corporations
Department of Commerce
2nd Floor Joeten Dandan Building Room 27
Caller Box 10007
Saipan, MP 96950

Check one: () Initial Report 20____ () Annual Report for 20____

1. NAME OF CORPORATION:

2. Mailing address of principal office at which business is conducted:

(In the Northern Marianas (CNMI)):

(Outside of the CNMI, if applicable)

3. Name, mailing address and telephone number of person to contact in regards to business affairs of the corporation:

Name

Address

Telephone Number:

4a. Date operations began in the CNMI:

4b. Type of business being conducted as of December 31, 20_____:

5a. Date of Annual Membership Meeting: _____ 5b. Date of Annual Membership Meeting, if any: _____

6a. List of Officers:

Name

Mailing Address

Position

Citizenship

Date

Assumed Office

President

Vice President

Secretary

Treasurer

6b. List of Board of Directors:

Name

Mailing Address

Citizenship

7a. Authorized capital (if not applicable, state "None"):

<u>Common</u>	<u>Amount</u>	<u>Par Value</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

7b. The amount of capital stock issued: \$ _____ 7c. The amount of capital stock paid up: \$ _____

8. List of all members: (If not enough space, attach separate listing.)

<u>Name</u>	<u>Mailing Address</u>	<u>Citizenship</u>
<u>Number of Shares</u>		

9. Land owned or lease within the CNMI by the Corporation. (State legal description; owned or leased (period) and purpose(s)):

ACKNOWLEDGMENT

COMMONWEALTH OF THE NORTHERN)
 MARIANA ISLANDS)
) SS.
SAIPAN, MARIANA ISLANDS)

I, _____, President, Secretary, or Treasurer of lawful age, being first duly sworn, say: That I executed the foregoing report in the name of and on behalf of _____ and that to the best of my knowledge the items contained herein are true and correct.

SIGNATURE

TITLE

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20____.

NOTARY PUBLIC