

2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 845032

Entity Name: ARMENIAN RELIEF SOCIETY OF EASTERN U.S.A., INC.**Current Principal Place of Business:**80 BIGELOW AVENUE
SUITE 200
WATERTOWN, MA 02472**Current Mailing Address:**80 BIGELOW AVENUE
SUITE 200
WATERTOWN, MA 02472**FEI Number:** 04-2684459**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name MKRTSCHJAN, TALINE
Address 99 DELLWOOD RD
City-State-Zip: CRANSTON RI 02920

Title DIRECTOR
Name BEDIAN, SILVA
Address 12 WEST BUR OAK DR
City-State-Zip: ARLINGTON HEIGHTS IL 60004

Title DIRECTOR, SECRETARY
Name SIMONIAN, MELISSA
Address 5 RIVER ROAD
City-State-Zip: N. PROVIDENCE RI 02904

Title DIRECTOR
Name BERBERIAN, VALENTINE
Address 71-12 HARROW ST
City-State-Zip: FOREST HILLS NY 11375

Title DIRECTOR
Name MEDINNA, MARGARET
Address 593 BOGERT ROAD
City-State-Zip: RIVER EDGE NJ 07661

Title PRESIDENT
Name ATTAR, ANNIE
Address 30978 PINE CONE DRIVE
City-State-Zip: FARMINGTON HILLS MI 48331

Title VP
Name KOLEJIAN, SEVAN
Address 24 LEA POND COURT
 SUITE 200
City-State-Zip: MONTGOMERY VILLAGE MD 20886

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANNIE ATTAR**PRESIDENT****04/25/2015**

Electronic Signature of Signing Officer/Director Detail

Date