



A. Ralph Mollis, Secretary of State

Providence, RI 02904-2615
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2007

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 * THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* 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.

1. Corporate ID No. 157150		2. Name of Corporation Faith Fellowship Assembly of God, Inc.	
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address 260 VICTORY HIGHWAY	
		City W. Greenwich	Zip RI
5. Foreign corporation. Enter principal office address		City	State 02817
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island ESTABLISHING AND MAINTAINING A PLACE FOR THE WORSHIP OF ALMIGHTY GOD			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name STEVEN SHIPPEE		Vice President Name NONE	
Street Address 191 SHARPE ST		Street Address	
City W. Greenwich	State RI	Zip 02817	
Secretary Name FRANK ROSSONI		Treasurer Name MIKE TALLEY	
Street Address 86 DAYNA DR		Street Address 127B DANIELSON PIKE	
City W. Greenwich	State RI	Zip 02817	City FOSTER
			State RI
			Zip 02815
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23			
Director Name GARY WRIGHT		Director Name PAUL LACHANCE	
Street Address 7 BOXWOOD DR		Street Address 569 HILL FARM RD	
City W. KINGSTON	State RI	Zip 02892	City COVENTRY
			State RI
			Zip 02816
Director Name NONE		Director Name DONALD ABRAHAM	
Street Address DOAT		Street Address 312 MISHNOCK RD	
City	State	Zip	City W. Greenwich
			State RI
			Zip 02817
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78			
Agent Name STEVEN SHIPPEE		Address	
Address 260 VICTORY HIGHWAY		City WEST GREENWICH	Zip 02817

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



157150

FILED	
File Date	JAN 16 2008
Check No.	EX 519
By	
FOR SECRETARY OF STATE USE ONLY	

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.

Signature of Officer **Steven A. Shippee** Date **1-15-08**
Print or Type Name of Officer **STEVEN A. SHIPPEE**
Title of Officer **PRESIDENT**