



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2615  
401.222.3040

**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008**  
 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. 92517		2. Name of Corporation Christ Temple United Pentecostal Church	
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address 1198 Fish Rd	
5. Foreign corporation. Enter principal office address NONE		City Tiverton	Zip 02878
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island Conducting Christian worship services			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Jay R. Stirnemann		Vice President Name NONE	
Street Address 165 Colonial Ave		Street Address	
City Tiverton	State RI	Zip 02878	
Secretary Name Sara R Axton		Treasurer Name Sara R Axton	
Street Address 5 Lepes Rd		Street Address 5 Lepes Rd	
City Tiverton	State RI	Zip 02878	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 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 Aaron Birge		Director Name Steve Birge	
Street Address 9 Wildwood Ave		Street Address 45 Everett St.	
City Taunton	State Ma	Zip 02780	
Director Name Christopher Pullano		Director Name Lee Frombach	
Street Address 15 Fairfield Ave		Street Address 341 Palmer St #2	
City Tiverton	State RI	Zip 02878	
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 <del>NONE</del>		Address	
Address		City	Zip

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

<b>FILED</b>	
File Date	JUN 24 2008
Check No.	749
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.

*Jay R. Stirnemann* 5/30/08  
 Signature of Officer / Date  
 JAY R. STIRNEMANN  
 Print or Type Name of Officer  
 PRESIDENT  
 Title of Officer