



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. 69919		2. Name of Corporation THE HOLY ORDER OF CHERUBIM & SERAPHIM CHURCH(MOUNT ZION)	
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address 415 CHARLES STREET	
		City PROV	Zip 02904
5. Foreign corporation. Enter principal office address NONE		City	State Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island RELIGIOUS PURPOSES (TO WORSHIP GOD)			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name AP.GEN. M.SUNDAY OLUFASOLA		Vice President Name NONE	
Street Address 415 CHARLES STREET		Street Address	
City PROV	State RI	Zip 02904	City State Zip
Secretary Name S/L/LEADER BISI ANIMASHAUN		Treasurer Name SIS. CINTHIA GBOLADE	
Street Address 415 CHARLES STREET		Street Address 415 CHARLES STREET	
City PROV	State RI	Zip 02904	City PROV State RI Zip 02904
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 MOTHER VICTORIA OGUNBIYI		Director Name RABBI OLUEBENGA OLUFASOLA	
Street Address 415 CHARLES STREET		Street Address 415 CHARLES STREET	
City PROV	State RI	Zip 02904	City PROV State RI Zip 02904
Director Name BRO. ADEOLA STAVELEY		Director Name NONE	
Street Address 415 CHARLES STREET		Street Address	
City PROV.	State RI	Zip 02904	City State Zip
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 AP..GEN. M.SUNDAY OLUFASOLA		Address 415 CHARLES STREET	
Address		City PROV	Zip 02904

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

**FILED**

JUN 30 2008

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File Date \_\_\_\_\_  
 Check No. \_\_\_\_\_  
 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]* Date

AP. GEN. M.SUNDAY OLUFASOLA  
 Print or Type Name of Officer  
 MINISTER

Title of Officer