



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

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. 7-6-9a, 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. 147832		2. Name of Corporation Centro Cristiano La Casa De La Roca			
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address P.O. Box 19660 689 Cranston Street / Johnston, RI 02919		City Providence	Zip
5. Foreign corporation. Enter principal office address		City	State	Zip	
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Jaime Hirmas			Vice President Name Donald Kimball		
Street Address 10 Claire Street			Street Address 144 Leetes Island Road		
City Riverside	State RI	Zip 02915	City Guilford	State CT	Zip 06437
Secretary Name Miriam Hirmas			Treasurer Name Miriam Hirmas		
Street Address 10 Claire Street			Street Address 10 Claire Street		
City Riverside	State RI	Zip 02915	City Riverside	State RI	Zip 02915
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 Sheila Kimball			Director Name Jorge Hirmas		
Street Address 144 Leetes Island Road			Street Address 307 Del Roy Drive		
City Guilford	State CT	Zip 06437	City SAN Marcos	State CA	Zip 92069
Director Name Rebeca Marshall			Director Name		
Street Address 45 Village Green North Apt D			Street Address		
City Riverside	State RI	Zip 02915	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			Address		
Address			City Zip		

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

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.

M Hirmas 07/14/08
Signature of Officer Date

Miriam Hirmas
Print or Type Name of Officer

Secretary
Title of Officer

File Date	FILED
Check No.	JUL 16 2008
By:	<u>1143</u>
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