



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 2009

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. 144156		2. Name of Corporation CHRIST FOUNDATION MISSION INTERNATIONAL			
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address 104, RUSSO STREET		City PROVIDENCE	Zip 02904
5. Foreign corporation. Enter principal office address RHODE ISLAND 1, KUFISILE ST. ISHEROWAN		City LAGOS	State LAGOS	Zip NIGERIA	
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island TO ESTABLISH AND MAINTAIN PLACES OF WORSHIP					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name SAMUEL O. IKUEJAMORO			Vice President Name EVANGELIST SIMON ADEYEMI		
Street Address 104, RUSSO STREET			Street Address 306 WALCOTT STREET		
City PROVIDENCE	State RI	Zip 02904	City PAW TUCKET	State RI	Zip 02860
Secretary Name JOSEPH O. SITOLAGBADE			Treasurer Name		
Street Address 58, WHINNLE STREET			Street Address		
City PROVIDENCE	State RI	Zip 02908	City	State	Zip
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 DELONESS MODUPE OLATAWURA			Director Name ELDER JOSEPH AKINBODE		
Street Address 200-101 LEONARD JENARD AR			Street Address 25, REGENT AVENUE		
City PAW TUCKET	State RI	Zip 02906	City PROVIDENCE	State RI	Zip 02909
Director Name JOSEPH O. SITOLAGBADE			Director Name SAMUEL O. IKUEJAMORO		
Street Address 58 WHINNLE STREET			Street Address 104 RUSSO STREET		
City PROVIDENCE	State RI	Zip 02906	City PROVIDENCE	State RI	Zip 02904
9. REGISTERED AGENT IN RHODE ISLAND SAMUEL OLURUNMI IKUEJAMORO					
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78					

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

FILED

APR 01 2009

File Date	By
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 of Officer
SAMUEL O. IKUEJAMORO
Date
04/01/09
Print or Type Name of Officer
PRESIDENT (PASTOR)
Title of Officer