

A. Ralph Mollis, Secretary of State Corporations Division

148 W. River Street

ovidence, 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. 7-6-94, 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.

permiting fee of #=31				 -	
L Corporate ID No.	2. Name of Corporation	on	CD		:
028384	Commu	nity Church c	of Providence	City	Zip
3. State of hicorporation	_				1 ·
Phode Island	372 W	ayland Ave	nue	Providence	02906
5. Foreign corporation. Enter pr	incipal office address	1	CHy	State	2.47
6. Brief Description of the characte	er of the affairs which are	e actually conducted in Rhode I.	sland		
	rship - Chu				
7. NAMES AND ADDRESS	ES OF THE OFFICE	ERS: ("X" BOX FOR ATTAC	HMENT) [FILL IN SPACES	BEFORE USING ATTACI	HMENTS
President Name			Vice President Name		
Pastor: Dr. E.	Ion D. How	xard	Moderator: David C. Burnham		
Street Address			Street Address		
117 Wilcox A	trenue		44 River Str		T
CITY Wilcox F Paustucket	State	Zip	City	State NA A	Zip
Pawtucket_	RI	02860	Rehoboth	MA	02769
Secretary Name			Treasurer Name	ı	
Natalie R. Austin			Anne W. Burnham		
			Street Address		
500 Angell S	treet 440	<u> </u>	44 River 5	rree	Zip
Street Address 500 Angell S City Providence	State RI	02906	Rehoboth	M A	02769
8 NAMES AND ADDRESS	ES OF THE DIREC	TORS: ("X" BOX FOR ATT	· L	S BEFORE USING ATTAC	
THE NUMBER OF DIREC	TORS OF A DOME	STIC (RHODE ISLAND)	CORPORATION SHALL NO	T BE LESS THAN THRE	<u>E</u> (3). R.I.G.L. 7-6-23
Director Name			Director Name		
Babak Teleghani			Anne Stewart		
Street Address	ð		Street Address		
Street Address 1 Hanley Farm Road City State RI 02885			84 Sheffield Road		
City	State	Zip	City 4 -+-	State	Zip
Warren	RI	02885	Cranston	RI	02920
Director Name			Director Name		Š.
Meridith 0	1-4-21				<u> </u>
Street Address			Street Address		3
88 Hanylowet	h Avenue				<u> </u>
88 Hopewart	State	Zip	City	State	Z4p 7
Bristol	RI	02809	1		
9. REGISTERED AGENT	IN RHODE ISLAND	no change			
1		7	tata Changas raquire filing of I	Form 641 - R 1 G 1 7-6-13	/7-6-78 — (7)
			tate. Changes require filing of I		
This report m	ast he signed by eit	her the President, Vice P	resident, Secretary, Assistant	Secretary, Treasurer, Rec	civer or 🗯 stee 🔭
tins report in	idat be argined by en		•		

	File DateFILED	
	Check No	
-	By 088899 1:3	þ
	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.

Anne	W.	Bur	nham	5/7/09
Signature of Offi				Date
_	11/	77	1	

Anne W. Burnham Print or Type Name of Officer

Treasurer
Title of Officer