

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.	2. Name of Corp	boration					
53110	Greater Pro	Greater Providence Church of Christ					
3. State of Incorporation	4. Corporate ado	dress in Rhode Island - Street .	Address	City	Zip		
Rhode Island	2 Ferncres	t Blvd		North Providence	02911		
5. Foreign corporation. Enter	r principal office addre	SSS	City	State	Ζıp		
Brief Description of the chara	acter of the affairs whic	ch are actually conducted in R	bode Island				
RELIGIOUS							
7. NAMES AND ADDRES	SSES OF THE OF	FICERS: ("X" BOX FOR A	TTACHMENT) FILL IN SPACE	S BEFORE USING ATTACH	MENTS		
President Name			Vice President Name				
LAWRENCE MARTINEAU			David Sutherland				
Street Address			Street Address				
134 Pineville Road			360 Whipple Avenue				
City	State	Zip	City	State	Zip		
Dayville	СТ	06241	Oakland	RI	02858		
Secretary Name	ecretary Name			Treasurer Name			
F. Haven Starr			F. Haven Starr				
Street Address			Street Address	·			
2 Ferncrest Blvd.			2 Ferncrest Blvd				
City	State	Zip	City	State	Zip		
North Providnece,	RI	02911	North Providence	j Ri	02911		
			ATTACHMENT) FILL IN SPACE				
	ECTORS OF A DO	MESTIC (RHODE ISLA	ND) CORPORATION SHALL NO	OT BE LESS THAN THREE	(3). R.I.G.L. 7-6-23		
Director Name			Director Name				
Lawrence Martineau			David Sutherland				
Street Address			Street Address				
134 Pineville Road			360 Whipple Avenud				
City	State	Zip	Сиу	State	Zip		
Dayville	CT	06241	Oakland	RI	02852		
Director Name		Director Name					
F. Haven Starr			-none-				
Street Address			Street Address				
2 Ferncrest Blvd			NA NA				
City	State	Zip	City	State	Ζip		
North Providence	RI	02911	INA	NA	NA		
9. REGISTERED AGENT	IN RHODE ISLA	ND					
This information is currer	ntly of record in th	e Office of the Secretary	of State. Changes require filing of I	Form 641 - R.I.G.L. 7-6-13/7	-6-78		
This report r	must be signed by	either the President, Vic	e President, Secretary, Assistant	Secretary, Treasurer, Receive	er or Trustee		

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File Date	FILED			
Check No.	MAY 1 8 2009			
Ву:	By 2057			
FOR SECRETARY OF STATE USE ONLY				

Under penalty of per	jury, I declare and af	firm that I ha	ive examined this
report, including any	accompanying schedu	ules and state	ments, and that all
statements contained	perein are true and co	птесу.	, (

Signature of Officer

F. Haven Starr

Print or Type Name of Officer

Secretary - Treasurer
Title of Officer