



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. 128323		2. Name of Corporation GOSPEL HELPERS			
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address 229 GARDEN ST		City CRANSTON	Zip 02910
5. Foreign corporation. Enter principal office address				City	State
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island TO MAKE KNOWN THE GOSPEL OF JESUS CHRIST					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name LEWIS HOWLAND			Vice President Name RAYMOND BARTLETT		
Street Address 229 GARDEN ST			Street Address 28 INEZ AV		
City CRANSTON	State R.I.	Zip 02910	City WARWICK	State RI	Zip 02886
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	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 LAWRENCE DENOFIO			Director Name BARBARA BARTLETT		
Street Address 107 MAWNEY ST			Street Address 28 INEZ AV.		
City E. GREENWICH	State R.I.	Zip 02818	City WARWICK	State R.I.	Zip 02886
Director Name FRANCES DENOFIO			Director Name		
Street Address 107 MAWNEY ST			Street Address		
City E. GREENWICH	State R. I.	Zip 02818	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND					
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	
File Date	MAY 19 2009
Check No.	117
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.

Lewis Howland Date
Signature of Officer
LEWIS HOWLAND
Print or Type Name of Officer
PRESIDENT
Title of Officer