



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. 106618 | | 2. Name of Corporation International Pentecostal Ministry The New Day | | | |
| 3. State of Incorporation Rhode Island | | 4. Corporate address in Rhode Island - Street Address 3 Beech Tree st | | City Newport | Zip 02840 |
| 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 To preach and ministry the gospel of Jesuschrist. | | | | | |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| President Name Carmen Villafane | | | Vice President Name Miranda Otto | | |
| Street Address 3 Beech Tree st | | | Street Address 18 Ranger st | | |
| City Newport | State R. I. | Zip 02840 | City Newport | State R. I. | Zip 02840 |
| Secretary Name Maritza Alvarez | | | Treasurer Name Awilda Ojeda | | |
| Street Address 24 John H Chafee Blvd | | | Street Address 3 Robert H Douglas Lane | | |
| City Newport | State R. I. | Zip 02840 | City Newport | State R. I. | Zip 02840 |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS (NO ATTACHMENT WAS RECEIVED) | | | | | |
| 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 Carmen Villafane | | | Director Name Maritza Alvarez | | |
| Street Address 3 Beech Tree st | | | Street Address 24 John H Chafee Blvd | | |
| City Newport | State R. I. | Zip 02840 | City Newport | State R. I. | Zip 02840 |
| Director Name Nellie Collazo | | | Director Name | | |
| Street Address 22 West Evans st | | | Street Address | | |
| City Newport | State R. I. | Zip 02840 | 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

106618

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|---------------------------------|---------------|
| File Date | 6-2-09 |
| Check No. | 1601 |
| By: | mnc |
| 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

Maritza Alvarez
Print or Type Name of Officer

Title of Officer

Date