

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.

penalty see of \$25.00.						
1. Corporate ID No.	2. Name of Corporation	ean Chu	veh al R	had-	T-11	1100
3. State of Incorporation	4. Corporate address in Ri	bode Island - Street Address	,	C	usiana,	Zip
<u>K,1.</u>	546 Bud	long Road,	Cranston.	RII	ranston	02920
5. Foreign corporation. Enter print	cipal office address		Сиу	Sh	ate	Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island						
Church: Bible study, mission & gods work						
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) [FILL IN SPACES BEFORE USING ATTACHMENTS						
President Name Kilza	Lee		Vice President Name			
Sireci Address 61 Herit	age Ro	ad	Street Address		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Seekonk	MA	02771	City	Sta	ite	Zip
Secretary Name Jhung	W. Jhu	na	Treasurer Name Seuna	Hee	Park	
	long Roa	d	Street Address 60 Edd	lu St	reet	
Cranston 8. NAMES AND ADDRESSES	RI. OF THE DIRECTOR	гір D2920 S: ("Х" ВОХ FOR ATTAC	Provide	nce Paces Beec	R. J.	02903
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	_		Director Name			.9). II.I. 0.2 7-0-29
<u>Sung Ok</u>	Park		OK.	<u>Jîn</u>	Farrell	
	hillip Dr	ive_	Street Address Ray	Imor	id Stre	et
Rehoboth	MA	02769	Lincol	n si	R.I.	02865
Kyungsook Rhee			Director Name John Lee			
174 Edvaille Court			2 Mohawk Street			
Warwick 9. REGISTERED AGENT IN R	RI I	02886	Covent	Ste	R.I.	18≤0
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						

	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all
File DateFILED	statements contained herein are true and correct. Signature of Officer Date
Check No. JUN 2 6 2009	Jhung W. Jhung,
By STOTE SHATT ISE ONLY	Prim or Type Name of Officer Secretary
	Tule of Officer Form 631 Rev. 09/17