

**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. 41015		2. Name of Corporation THE UNIV G.S CHURCH MOUNT. AME - INC.	
3. State of Incorporation Rhode Island		4. Corporate address in Rhode Island - Street Address 2097 PLAINFIELD PKE JOHNSTON JOHNSTON	
5. Foreign corporation. Enter principal office address		City /	Zip /
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island NON PROFIT RELIGIOUS ORGANIZATION - CHURCH			
7. NAMES AND ADDRESSES OF THE OFFICERS: (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name PASTOR ABRAHAM FASHAKIN		Vice President Name PASTOR FLORENCE FASHAKIN	
Street Address 1015 GERARD AVE 3F BRX NY 10452		Street Address 1015 GERARD AVE # 3F	
City BRONX	State N.Y	City BRONX	Zip 10452
Secretary Name MICHAEL DRIMOLADE		Treasurer Name REBECCA OYEDOTUN	
Street Address 2097 PLAINFIELD PKE		Street Address 1015 GERARD AVE # 3F	
City JOHNSTON	State R.I.	City BRONX	Zip 10452
8. NAMES AND ADDRESSES OF THE DIRECTORS: (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> 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 ANTHONY LYLOLA		Director Name QUEEN ESTHER ENIOLA	
Street Address 160 DONIZETTI PLACE		Street Address 1015 GERARD AVE 3F	
City BRONX	State N.Y	City BRONX	Zip 10452
Director Name SAMUEL OLAYINKA OYEDOTUN		Director Name	
Street Address 3415 MORGANZER LANE		Street Address	
City ALPHARETA	State G.A	City	Zip 30022
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78			
Agent Name JAMES OLUSEGUN OSMO		Address	
Address 2097 PLAINFIELD PKE R.I. 02919		City	Zip

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date	<b>FILED</b>
Check No.	JUL 27 2009
By:	11031
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.

PASTOR  
Signature of Officer  
ABRAHAM FASHAKIN  
Date  
PRESIDENT  
Title of Officer

July 05 / 2009