

Amended

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 401.2

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.

penally fee of \$25.00.				
1. Corporate ID No. 2. Name of Corporation 104233 MUNISTERS CONFERENCE EMPOWERMENT				
3. State of Incorporation 4. Corporate address in Rhode Island - Street Address	REET PRHIDENCE RI 02907			
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 PROMOTE THE KINGDOM OF GVD OF TESUS CHRIST TOROUGH ONFER				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHM	MENT) TILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Rev Valentino Olawoyin	Moses Clawatern Clawater			
Street Address At The Street	Street Address Westgnve Court			
Chyprodente State RI 2102907	Mansfuld State Texas 210 6063			
Secretary siame Kayode Awosanya	Treasurer Name Mayy WWY OG			
Street Address 241 Sunater SWeet	Street Address Wist 97Wa Court			
Product RI OLGO, 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTAC	Mousfield Texas Zip The Monstrold Texas Tools The Month of 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 Dea Coness Grace Olawayin	Rev Phily Lescyesi			
Street Address 87 Althea swelt	Street Address 42 Homer Street			
City Providence State RI 210 2907	Prondence State Zip (25)			
Director Name Oyenike Anuce Awonalice	Director Name S S Stant Address			
Street Address 23007 Amber Lane	Street Address			
State LL 21p 9. REGISTERED AGENT IN RHODE ISLAND	City State Zip			
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-28-				
This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee				

	, ITCD		
5	SEP 22 2009		
By	Oni	report, including any accompanying	e and affirm that I have examined this g schedules and statements, and that all
File Date	1944	statements contained herein are tru	and correct.
Check No.	_ ' ' ' /	Signature of Officer Rev Valleway	O GWIYIN
Ву:	_	Print or Type Name of Officer	
FOR SECRETARY OF STATE USE ONLY		Title of Officer	Form 631 Rev. 09/17