



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 2008

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. 000091562		2. Name of Corporation Abundant Life Church of God in Christ			
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address 1532-34 Broad St		City Cranston	Zip 02905
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 Church					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Shirley Robinson			Vice President Name		
Street Address 368 Hawkins St			Street Address		
City Providence	State RI	Zip 02904	City	State	Zip
Secretary Name Shirley Brown			Treasurer Name		
Street Address 371 Sayles St			Street Address		
City Providence	State RI	Zip 02905	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 Anthony King			Director Name Christen Tate		
Street Address 10 Millard St			Street Address 85 Esmond		
City Providence	State RI	Zip 02905	City W. Warwick	State RI	Zip 02893
Director Name William Brown			Director Name		
Street Address 471 Mercy St			Street Address		
City Providence	State RI	Zip 02909	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

FEB 17 2010

By *Gm*

029-111178

File Date	
Check No.	
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.

Shirley Brown

Signature of Officer

2/17/2010

Date

Shirley Brown

Print or Type Name of Officer

Secretary

Title of Officer