

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 2010

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 2. Name of Corporation

10915	Ministers Alliance of Rhode Island				
3. State of Incorporation	· · · · · · · · · · · · · · · · · · ·	Rhode Island - Street Addre	88	' City	Zip
RI	50 Lupine St	reet		Pawtucket	02860
5. Foreign corporation. Enter prin	cipal office address		City	State	Zip
6. Brief Description of the character	of the affairs which are ac	tually conducted in Rhode I	Island		
Religious Acti	vities and Pr	cograms			
7. NAMES AND ADDRESSES	OF THE OFFICERS	S: ("X" BOX FOR ATTAC	THMENT) [ FILL IN SPACES	BEFORE USING ATTA	CHMENTS
President Name			Vice President Name		
William L. Shaw II			Robert Farrow		
Street Address			Street Address		
50 Lupine Stre	et State	Zip	1014 Broad Stre	State	Zip
Pawtucket	RI	02860	Providence	RI	02905
Secretary Name Sammy Vaughan			Treasurer Name Matthew Kai		
Street Address			Street Address		
340 South Main Street			134 Brigham Street		
City	State	Zip	City	State	Zip
Woonsocket	RI	02895	Providence	RI	02907
			ACHMENT) TILL IN SPACES		
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6					
Vincent Thompson			Director Name Jeff Williams		
Street Address 50 Dr. Marcus Wheatland Blvd			Street Address 433 Elmwood Avenue		
City Newport	State RI	02840	City Providence	State RI	<sup>Ζίρ</sup> 02907
Director Name			Director Name		
Ernest Ward			0424		
Street Address 75 Chester Avenue			Street Address		
СИУ	State	Zip	City	State	Zip
Providence	RI	02907	I		
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					
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This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver of Trust					
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	JUN	1 1 2010			$\sim$
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	BY	120211			n that I have examined this and statements, and that all
	_BY	1		herein are true and correct	
File Date					6/9/10
			Signature of Officer		Date
Check No			William L.		- 11-11
Ву:		(_	Print or Type Name of	f Officer	
FOR SECRETARY OF ST	TATE USE ONLY	4	<u>President</u>		
			Title of Officer		Form 631 Rev. 09/17