

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI (12904-2615

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.

Corporate ID No. 2. Name of Corporation					
117556 Garden City Baptist Church 3 State of Incorporation 4. Composite address in Aboute leand - Street Address City Zip					
l	and AUCNU	e	Smithfield	2ip 02917	
5. Foreign corporation. Enter principal office address		Chy	State	Zip	
6. Brief Description of the character of the affair which are naturally conducted in Rhode Island To be a dynamic Spiritual body empowered by the Haly Spirit to share Christ with as In any people as possible in our church community and world.					
many people as possible in our Church, community and world. 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FIEL IN SPACES BEFORE USING ATTACHMENTS					
President Name		Vice President Name			
Rev. Frank I atrate		nove			
Sireel Address 48 Woodland Huenue		Street Address			
Smithfield RI	02917	Сиу	State	Ζip	
Secretary Name Elizabeth J. Infrate		Treasurer Name Elizabeth J. J	Catrate		
Street Address Wordland Avenue		Sireei Address 48 Woodland			
Smithfield State 2	02917	Smithfield	State RT	2ip 02917	
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) C	ORPORATION <u>SHALL NOT B</u>	E LESS THAN THREE	(3). R.I.G.L. 7-6-23	
Director Name		Director Name			
Rev. Frank Latrate		Earle +. Perry			
Street Address 48 Wood land Avenue		Street Address 5 Ray Monds	s Point Roa	d	
	02917	Coventry	State R I	2ip 02816	
Royald W. Corsi		Director Name			
street Address 126 Bracken Stroet		Street Address			
	02920	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					

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Under penalty of perjury, I declare and affirm the	nat I have examined this
report, including any accompanying schedules an	
statements contained begein are true and correct.	
Rev Frank Petrote	6010110
Signature of Officer	Date
Rev. Frank Isfrate	
Print or Type Name of Officer	
President	
Title of Officer	
	Form 631 Rev. 09/17