



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 2011

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. 117385		2. Name of Corporation Truth Tabernacle United Pentecostal Church Inc.			
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address 542 Potters Ave		City Prov.	Zip 02907
5. Foreign corporation. Enter principal office address				City	State
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island Religious					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name John J. OWENS			Vice President Name		
Street Address 61 Longue Vue Ave.			Street Address		
City N. Prov.	State RI	Zip 02904	City	State	Zip
Secretary Name			Treasurer Name Sabrina Harlan		
Street Address			Street Address 42 Beausoleil St.		
City	State	Zip	City Woonsocket	State RI	Zip 02895
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 Paul Britto			Director Name L. NORRINE SIMPSON		
Street Address 543 Potters Ave.			Street Address 349 Farmington Ave.		
City Prov.	State RI	Zip 02907	City Cranston	State RI	Zip 02910
Director Name David Britto			Director Name GAIL ERICKSON		
Street Address 30 Togansett Rd			Street Address 275 Snakehill Rd.		
City Prov.	State RI	Zip 02910	City N. Scituate	State R.I.	Zip 02857
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

File Date	JUN 14 2011
Check No.	
By:	BY [Signature] 29-14638
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.

Signature of Officer

John J. OWENS

Print or Type Name of Officer

PRES.

Title of Officer

Date

6-14-11