



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. <b>103787</b>		2. Name of Corporation <b>A-47 INTERDENOMINATIONAL CHRISTIAN ASSEMBLY</b>	
3. State of Incorporation <b>RHODE ISLAND</b>		4. Corporate address in Rhode Island - Street Address <b>483 WASHINGTON STREET</b>	
		City <b>PROVIDENCE</b>	Zip <b>02903</b>
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 <b>TO PROVIDE FOOD, CLOTHING, HOUSING, CHRISTIAN VALUES, EDUCATION AND REHABILITATION TO CHILDREN WHO HAVE BEEN DISPLACED OR SEPARATED FROM THEIR FAMILIES.</b>			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name <b>RALPH L. FLOWERS</b>		Vice President Name <b>VASSAH FLOWERS</b>	
Street Address <b>483 WASHINGTON STREET</b>		Street Address <b>483 WASHINGTON STREET</b>	
City <b>PROVIDENCE</b>	State <b>RI</b>	City <b>PROVIDENCE</b>	State <b>RI</b>
Zip <b>02903</b>		Zip <b>02903</b>	
Secretary Name <b>CHADENE KNIGHT</b>		Treasurer Name <b>THERESA Y. PIERCE</b>	
Street Address <b>483 WASHINGTON STREET</b>		Street Address <b>483 WASHINGTON STREET</b>	
City <b>PROVIDENCE</b>	State <b>RI</b>	City <b>PROVIDENCE</b>	State <b>RI</b>
Zip <b>02903</b>		Zip <b>02903</b>	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 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 <b>ROSELINE GOODRIDGE</b>		Director Name <b>ANGELINE KOLLIE</b>	
Street Address <b>483 WASHINGTON STREET</b>		Street Address <b>483 WASHINGTON STREET</b>	
City <b>PROVIDENCE</b>	State <b>RI</b>	City <b>PROVIDENCE</b>	State <b>RI</b>
Zip <b>02903</b>		Zip <b>02903</b>	
Director Name <b>MCNEIL H. WHITE</b>		Director Name	
Street Address <b>483 WASHINGTON STREET</b>		Street Address	
City <b>PROVIDENCE</b>	State <b>RI</b>	City	State
Zip <b>02903</b>			
9. REGISTERED AGENT IN RHODE ISLAND <b>RALPH L. FLOWERS</b>			
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-28			

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This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

**FILED**

File Date **AUG 04 2011**

Check No. **149758**

By: *[Signature]*

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.

**Ralph L. Flowers**, 8/4/11  
 Signature of Officer Date  
**Pastor**  
 Full Name of Officer  
 Title of Officer