

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 2009

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				
28153	Greystone Primitive Methodist Church				
3. State of Incorporation	4. Corporate address in I	Rbode Island - Street Address		Ciț:	Zip
Rhode Island	1 Oakleigh Avenu	ue (P.O. Box 113918)	North Providence	02911
5. Foreign corporation. Enter princ	cipal office address		City	State	Zip
6. Brief Description of the character of	of the affairs which are ac	tually conducted in Rhode Isla	md		
To provide and maintain a p	lace where people of	can come and worship	our heavenly Father and his	Son, Jesus Christ	
					NATIONAL CONTROL
7. NAMES AND ADDRESSES	OF THE OFFICERS	S; ("X" BOX FOR ATTACH		BEFORE USING ATTACH	IMEN 15
President Name			Vice President Name		
George Young			Gary Labrie		
Street Address			Street Address		
258 Waterman Avenue			86 Log Road		
City	State	Zip	City	State Dheada Jaland	02917
North Providence	Rhode Island	02911	Smithfield	Rhode Island	02917
Secretary Name			Treasurer Name		
Donna Wood			David Carlson		
Street Address			Street Address		
16 Greystone Avenue		306 West Greenville Ro		Zin	
City	State	Zip	City	State	Zip 00057
North Providence	Rhode Island	02911	Scituate	Rhode Island	02857
8. NAMES AND ADDRESSE	S OF THE DIRECTO	RS: ("X" BOX FOR ATTA	CHMENT) FILL IN SPACES	BEFORE USING ATTAC	HMENIS
THE NUMBER OF DIRECT	ORS OF A DOMEST	IC (RHODE ISLAND)	CORPORATION <u>SHALL NOT</u>	<u> BE LESS THAN THREI</u>	(3). R.L.G.L. 7-6-23
Director Name			Director Name		
George Young			Gary Labrie		
Street Address			Street Address		
258 Waterman Avenue			86 Log Road		
City	State	Zip	City	State	Zip
North Providence	Rhode Island	02911	Smithfield	Rhode Island	02917
Director Name			Director Name		
Donna Wood			David Carlson		
Street Address			Street Address		
16 Greystone Avenue			306 West Greenville Road		
City	State	Zip	City	State	Zip
North Providence	Rhode Island	02911	Scituate	Rhode Island	02857
9. REGISTERED AGENT IN					20,
1	***			(AL DICL 7 6 12)	7679
This information is currently	of record in the Offi	ce of the Secretary of Sta	te. Changes require filing of Fe	orm 641 - K.I.G.L. 7-6-13/	7-0-7 0
This report mus	t he signed by either	r the President, Vice Pre	esident, Secretary, Assistant S	Secretary, Treasurer, Rece	iver or Trustee
This report mas			,	•	40
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78	153 ^{ву}				% √ ₇₇
— 20		TW	Under penalty of pe	rjury, I declare and affirm	that I have examined thi
		1 '. ~	report, including any	y accompanying schedules a	nd statements, and that al
		$\neg V \mid 1 \land \lozenge \nearrow$	statements contained	l herein are true and correct.	·
			19 Don	no Wo	00
File Date		-	Signature of Officer		Date
Charl Na			1		
Check No.			Donna Wood	r or:	
B		· 1	Print or Type Name o	g Officer	
Ву:	and the second of the second o	_			
		 .	Secretary		
FOR SECRETARY OF	STATE USE ONLY		Secretary Title of Officer		Form 631 Rev. 09/17

Non Profit Corporation Annual Report attachment to Number 8. Names and Addresses of the Directors:

Additional Directors:

Mary Leath 14 Blueberry Lane Johnston, RI 02919-1902

Alan Atkinson 11 Hebdeen St Johnston, RI 02919