



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov/business

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2011

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <u>163381</u>	2. Exact name of the Corporation <u>National Church Usher Association of Rhode Island Inc</u>				
3. State of Incorporation <u>RI</u>	4. Brief description of the character of business conducted in Rhode Island <u>A church usher is an officer of the church who helps the pastor to make the service successful</u>				
5. Principal office address <u>14 Wildflower Circle</u>		City <u>Warwick</u>	State <u>RI</u>	Zip <u>02889</u>	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <u>Thelma Rogers</u>		Vice-President Name <u>Alycia Smith</u>			
Street Address <u>114 Wood Street</u>		Street Address <u>14 Wild Flower Circle</u>			
City <u>Providence</u>	State <u>RI</u>	Zip <u>02909</u>	City <u>Warwick</u>	State <u>RI</u>	Zip <u>02889</u>
Secretary Name <u>Velma Hedges</u>		Treasurer Name			
Street Address <u>84 Indiana Ave</u>		Street Address			
City <u>Providence</u>	State <u>RI</u>	Zip <u>02905</u>	City	State	Zip
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name <u>Thelma Rogers</u>		Director Name <u>Alycia Smith</u>			
Street Address <u>114 Wood Street</u>		Street Address <u>14 Wild Flower Circle</u>			
City <u>Providence</u>	State <u>RI</u>	Zip <u>02909</u>	City <u>Warwick</u>	State <u>RI</u>	Zip <u>02889</u>
Director Name <u>Velma Hedges</u>		Director Name			
Street Address <u>84 Indiana Ave</u>		Street Address			
City <u>Providence</u>	State <u>RI</u>	Zip <u>02905</u>	City	State	Zip
8. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

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

FILED

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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.

Alycia Smith 6/1/12

Signature of Officer

Date

Alycia Smith

Print or Type Name of Officer

VICE PRESIDENT

Title of Officer

File Date

Check No

By:

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