RI SOS Filing Number: 201295414840 Date: 07/26/2012 4:00 PM

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 2012

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.	2. Exact name of the Corporation
694267	Chistian Coalition for Political Action
3. State of Incorporation: Rhode Island.	4. Brief description of the character of business conducted in Rhode Island: to Represent and FOSTER christian values, to educate and train Leaders, & to develop new initiatives for social & political action.

5. Principal office address	City	State	Zip
677 Cranston st	Providence	RI	02907

6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

President Name	Street Address	City	State	Zip
Ing. Eulogio Acevedo	677 Cranston street	Providence	RI	02907

Vice-President Name	Street Address	City	State	Zip
Dr. Jenny Tapia Rosario	934 Narragansett Blvd.	Providence	RI	02905

Secretary Name	Street Address	City	State	Zip
Rev. Julio Sabater	1140 Smith st.	Providence	RI	02908

Treasurer Name	Street Address	City	State	Zip
Rev. Rafael Galarza	29 Newark St	Providence	RI	02908

7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) ☐

Director Name	Street Address	City	State	Zip
Rev. Angeles Sabater	1140 Smith st	Providence	RI	02908

Director Name	Street Address	City	State	Zip
Marielyn Alba Acevedo	677 Cranston st	Providence	RI	02907

Director Name	Street Address	City	State	Zip
Jaime Romero	199 Penn st	Providence	RI	02909

Director Name	Street Address	City	State	Zip
José Sangiovanni	7 Whelan RD 1-1	Providence	RI	02909

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

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED
JUL 26 2012
By DS

JUL 26 PM 3:08
SECRETARY OF STATE
CORPORATIONS DIV.

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 — Date: 7-25-2012

Ing. Eulogio Acevedo
Printed/Type Name of Officer

Presidente
Title of Officer

Form No. 631
Revised: 05/2012

81369-2-764754