

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

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	2. Exact name of the Corporation				
146607	My F.	My Fathers Heart Fellowshyp Church 4. Brief description of the character of business conducted in Rhode Island				
3. State of Incorporation	4. Brief description	on of the character of bu	usiness conducted in Rhode	Island		
RI	Religions e			Services		
5. Principal office address	3 Stansk	Juny St	City PAGV	State	Zip 0408	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) (***/BOX FOR ATTACHMENT)						
President Name Granger Runnam			Vice-President Name		<u> </u>	
Street Address //3 Stansburn J.			Street Address	attache		
City Prov	State R1	Zh 0908	City	State	Zip	
Secretary Name		<u> </u>	Treasurer Name		1	
Street Address			Street Address 6			
City	State	Zip	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)						
Director Name Aranger P. Linumons			Director Name 52			
Street Address 1/3 Stanshum.			Street Address			
City Prov	State 21	12ip 02908	City	State	Zip	
Director Name			Director Name	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
Street Address			Street Address			
City	State	Zip	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						

File Date Check No By: FOR SECRETARY OF STATE USE ONLY	FILED C AUG 2 7 2012 — 17743 >	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 Print or Type Name of Officer
Form No. 631 Revised: 05/2012		Title of Officer

There are no officers or merbers left for Entity ID no. 14660 My Father's Heart fellowship church. Please dissolve this non-projet organistica.

Franger T. Simmons

President

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