



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 2013

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. 29918		2. Exact name of the Corporation The Pleasant Street Baptist Church of Westerly, Rhode Island			
3. State of Incorporation Rhode Island		4. Brief description of the character of business conducted in Rhode Island Religious Institution - Baptist Faith			
5. Principal office address 31 Pleasant Street			City Westerly	State RI	Zip 02891
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Rev. Joshua A. McClure			Vice-President Name Assoc. Pastor Mallory Davis		
Street Address 24 Fieldsview Road			Street Address 113 Allston Street		
City Bradford	State RI	Zip 02808	City Providence	State RI	Zip 02908
Secretary Name Jennifer France			Treasurer Name Dorothy McClure		
Street Address 114 Beach Street			Street Address 26 Canterbury		
City Westerly	State RI	Zip 02891	City Bradford	State RI	Zip 02808
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 Joseph Siner, President - Diaconate Board			Director Name Beverly Babcock, Clerk		
Street Address 86 N.W. Corner Road			Street Address 13 Malxson Hill Road		
City No. Stonington	State CT	Zip 06359	City Ashaway	State RI	Zip 02804
Director Name Ms. Eva Davis, Financial Secretary			Director Name		
Street Address 113 Allston Street			Street Address		
City Providence	State RI	Zip 02908	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

MAY 21 2013

By *JMM*
 CR # 8340

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.

May 20 2013

Signature of Officer

Date

Rev. Joshua A. McClure, Pastor

Print or Type Name of Officer

President

Title of Officer