



**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. <b>526687</b>		2. Exact name of the Corporation <b>Sheldon Street Church</b>			
3. State of Incorporation <b>Rhode Island</b>		4. Brief description of the character of business conducted in Rhode Island <b>Christian Mission</b>			
5. Principal office address <b>51 Sheldon ST</b>		City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>	
<b>6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/></b>					
President Name <b>Marcia S Andrade</b>			Vice-President Name <b>Vera Wilson</b>		
Street Address <b>44 Arnold ST</b>			Street Address <b>48 Firglade Ave</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>
Secretary Name <b>Marsha Smith</b>			Treasurer Name <b>Allen White</b>		
Street Address <b>86 Corinth ST</b>			Street Address <b>20 Hillside Drive</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02907</b>	City <b>Warwick</b>	State <b>RI</b>	Zip <b>02889</b>
<b>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"/></b>					
Director Name <b>Raymond Thompson</b>			Director Name <b>Earl Archibald</b>		
Street Address <b>29 Melissa Street</b>			Street Address <b>176 Fifth ST</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>
Director Name <b>Sylvia E Wilson</b>			Director Name <b>Libana Steele</b>		
Street Address <b>871 Hope Street</b>			Street Address <b>127 Lakeside Ave</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>	City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</b>
<b>8. REGISTERED AGENT IN RHODE ISLAND</b>					
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 30 2013**

**6324**

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.

**Marcia S Andrade 5.28.2013**

Signature of Officer \_\_\_\_\_ Date \_\_\_\_\_

**Marcia S. Andrade**

Print or Type Name of Officer

**President**

Title of Officer