



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

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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