



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. 133086		2. Exact name of the Corporation First Baptist Church of West Warwick			
3. State of Incorporation RI		4. Brief description of the character of business conducted in Rhode Island Church Services for Adults and Children			
5. Principal office address 1613 Main Street		City West Warwick	State RI	Zip 02893	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Linda Hansen - Moderator			Vice-President Name None		
Street Address 12 Friar Tuck Lane			Street Address		
City Coventry	State RI	Zip 02816	City	State	Zip
Secretary Name Genisa Urquhart			Treasurer Name Carol Correto		
Street Address 322 Broadway			Street Address 281 Hope Furnace Rd		
City Providence	State RI	Zip 02909	City Hope	State RI	Zip 02831
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 Lynda Hawkins			Director Name Ernie Lein		
Street Address 226 Plain Meeting House Road			Street Address 6342 Flat River Road		
City West Greenwich	State RI	Zip 02817	City Greene	State RI	Zip 02827
Director Name Joan Lein			Director Name Fred Herchuk		
Street Address 6342 Flat River Road			Street Address 80 Panto Road		
City Greene	State RI	Zip 02827	City Warwick	State RI	Zip 02886
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.					

RECEIVED
 SECRETARY OF STATE
 CORPORATIONS DIV
 2013 JUN - 3 PM 12:

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

JUN 03 2013

BY 49-198508 AA

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.

Carol Correto 5/29/2013
 Signature of Officer Date

Carol Correto
 Print or Type Name of Officer

Treasurer
 Title of Officer