

## 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

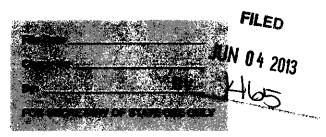
Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov/business

## 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.	2. Exact na	2. Exact name of the Corporation				
28494	The Rector, Wardens and Vestry of the Chapel of St. John the Divine					
3. State of Incorporation	4. Brief des	cription of the characte	er of business conducted in Rhode Isla	nd .		
Rhode Island	Church of Worship					
5. Principal office address 10 Church Way, P.O. Box 541			City Saunderstown	State RI	Zip <b>02874</b>	
Section for the section of the secti	angalija kantanan sa maran sa Maran sa maran sa ma	a per company minima de la proposa e la para sera para la como per la como de la como de la como de la como de La como de la como de	No. 18 April Company Company (Section 1997)			
President Name			Vice-President Name			
Jean Bowerman			Kenneth Cahill			
Street Address			Street Address			
10 Enwright Court			16D Caddy Rock Rd.			
City	State <b>RI</b>	Zip	City	State	Zip	
Exeter	RI	02822	North Kingstown	RI	02852	
Secretary Name Elizabeth Moylan			Treasurer Name Linda Rockwell			
Street Address 58 Crsswynds Drive			Street Address 455 Sand Turn Road			
City	State	Zip	City	State	Zip	
Saunderstown	RI	02874	West Kingstown	RI	02892	
		TERROR CONTRACTOR		149. <u>198</u> 114.	virte (\$1000 - 1000	
Director Name Anne O'Neil			Director Name Lillian Dunning			
Street Address 155 Cliff Rd.			Street Address 135 Ferry Road			
City	State	Zip	City	State	Zip	
Narragansett	RI	02882	Saunderstown	RI	02874	
Director Name Thomas Walsh			Director Name Maureen Johson			
Street Address 138 Treasure Rd.			Street Address PO Box 148			
City Narragansett	State RI	Zip <b>02882</b>	City Saunderstown	State <b>RI</b>	Zip 02874	
O PERSONAL MEDITAL	NAME OF THE PARTY					
			ary of State. Changes require filing	Form 641.	<u>ngan ji ka tan kan ng tantang katang ka tanggal p</u>	
			President Secretary Assistant Secretar		eiver or Trustee	



Form No. 631 Revised: 05/2012 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

6/3/2013

Date

Jean Bowerman

Print or Type Name of Officer

Senior Warden

Title of Officer