



**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>000506326</u>		2. Exact name of the Corporation <u>Centro Cristiano de Providence</u> <u>Providence Christian Center</u>	
3. State of Incorporation <u>RI</u>		4. Brief description of the character of business conducted in Rhode Island <u>Non profit - Church</u>	
5. Principal office address <u>60 River Avenue</u>		City <u>Prov.</u>	State <u>RI</u>
		Zip <u>02908</u>	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
President Name <u>Angel Melendez</u>		Vice-President Name <u>Carmen Melendez</u>	
Street Address <u>11 E. Shelby St.</u>		Street Address <u>11 E. Shelby St.</u>	
City <u>Worc.</u>	State <u>MA</u>	Zip <u>01605</u>	City <u>Worc.</u>
			State <u>MA</u>
			Zip <u>01605</u>
Secretary Name <u>Mireya Perez</u>		Treasurer Name	
Street Address <u>425 Pleasant St. # 1107</u>		Street Address	
City <u>Worc.</u>	State <u>MA</u>	Zip <u>01609</u>	City
			State
			Zip
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>Angel Melendez</u>		Director Name <u>Carmen Melendez</u>	
Street Address <u>11 E. Shelby St.</u>		Street Address <u>11 E. Shelby St.</u>	
City <u>Worc.</u>	State <u>MA</u>	Zip <u>01605</u>	City <u>Worc.</u>
			State <u>MA</u>
			Zip <u>01605</u>
Director Name <u>Mireya Perez</u>		Director Name	
Street Address <u>425 Pleasant St. # 1107</u>		Street Address	
City <u>Worc.</u>	State <u>MA</u>	Zip <u>01609</u>	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

2014 APR 24 PM 3:06  
 DEPARTMENT OF STATE  
 CORPORATIONS DIV

**FILED<sup>e</sup>**

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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.

Carmen Melendez 4/24/14  
 Signature of Officer Date

Carmen Melendez  
 Print or Type Name of Officer

Vice-president  
 Title of Officer

File Date \_\_\_\_\_  
 Check No \_\_\_\_\_  
 By \_\_\_\_\_  
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