



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 2014

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.

2014 APR 25 AM 9:34
 SECRETARY OF STATE
 CORPORATIONS DIVISION

1. Entity ID No. 560013		2. Exact name of the Corporation GRACE FAMILY WORSHIP CENTER			
3. State of Incorporation RI		4. Brief description of the character of business conducted in Rhode Island CHURCH			
5. Principal office address 665 GEORGE WASHINGTON HWY		City LINCOLN	State RI	Zip 02865	
President Name DAVID MARQUARD			Vice-President Name TONY PALMISANO		
Street Address 665 GEORGE WASHINGTON HWY		Street Address 3884 HIBISCUS ST.			
City LINCOLN	State RI	Zip 02865	City WESTON	State FL	Zip 33332
Secretary Name ANN MARQUARD			Treasurer Name PAUL DICICCO		
Street Address 665 GEORGE WASHINGTON HWY		Street Address 82 COACH RD.			
City LINCOLN	State RI	Zip 02865	City N. ATTLEBORO	State MA.	Zip 02760
Director Name DAVID MARQUARD			Director Name TONY PALMISANO		
Street Address 665 GEORGE WASHINGTON HWY		Street Address 3884 HIBISCUS ST.			
City LINCOLN	State RI	Zip 02865	City WESTON	State FL	Zip 33332
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City LINCOLN	State RI	Zip 02865	City N. ATTLEBORO	State MA	Zip 02760

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

FILED
 APR 25 2014
 223017
 9:36

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.

Rev. David Marquard 4/24/14
 Signature of Officer Date

REV. DAVID MARQUARD
 Print or Type Name of Officer

PRESIDENT
 Title of Officer