



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Non-Profit Corporation  
Annual Report**

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

**ANNUAL REPORT YEAR:** 2014

**1. Corporate ID No.** 000028048

**2. Name of Corporation** North Tiverton Baptist Church

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 198 MAIN ROAD

City or Town: TIVERTON

State: RI

Zip: 02878

Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:

City or Town: State: Zip: Country:

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

RELIGIOUS, CHURCH

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**

**THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	DOUGLAS CARLO	1 MILL STREET TIVERTON, RI 02878 USA
CLERK	ROSE TAYLOR	760 ANTHONY ROAD PORTSMOUTH, RI 02871 USA
PRESIDENT	PASTOR MICHAEL R HAMILTON	18 LADEIRA AVENUE

		PORTSMOUTH, RI 02871 USA
DIRECTOR	RICHARD REESE	99 MILL LANE PORTSMOUTH, RI 02871 USA
DIRECTOR	DOUGLAS CARLO	1 MILL STREET TIVERTON, RI 02878 USA
DIRECTOR	JAMES TAYLOR	3 BIRCH ST TIVERTON, RI 02878 USA
DIRECTOR	MANUEL ALVAREZ	65 HARRIS DRIVE TIVERTON, RI 02878 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

MICHAEL R. HAMILTON 198 MAIN ROAD TIVERTON , RI 02878

**9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.**

**Signed this 19 Day of May, 2014 at 6:21:47 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By MICHAEL R. HAMILTON  
Signature of Authorized Person

Form No. 631  
Revised 09/07