



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. 000027844

2. Name of Corporation OCEAN STATE BAPTIST CHURCH.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 600 DOUGLAS PIKE

City or Town: SMITHFIELD

State: RI

Zip: 02917

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

THE TEACHING AND PREACHING OF JESUS CHRIST

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	BRUCE NICHOLS	52 TRENT AVE WARWICK, RI 02889 USA
SECRETARY	LINDA EMERSON	600 DOUGLAS PIKE SMITHFIELD, RI 02917 USA
PRESIDENT	ARCHIE EMERSON	600 DOUGLAS PIKE

		SMITHFIELD, RI 02917- USA
DIRECTOR	RICHARD LANDI	130 STILLWATER RD SMITHFIELD, RI 02917 USA
DIRECTOR	JARED MATTESON	55 HORNBEAM RD. COVENTRY, RI 02816 USA
DIRECTOR	STEVE BAILEY	156 STILLWATER RD SMITHFIELD, RI 02917 USA
DIRECTOR	DON LARIVIERE	220 PROVIDENCE PIKE NORTH SMITHFIELD, RI 02896 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**

ARCHIE P. EMERSON 600 DOUGLAS PIKE SMITHFIELD , RI 02917

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

**Signed this 3 Day of June, 2014 at 12:02:49 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 LINDA EMERSON  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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