

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.

1. Entity ID No.	2. Exact name of the Corporation		-	
- 9)		i		
792070	Journey I hrow	gh Faith of business conducted in Rhode Island		
State of Incorporation	4. Brief description of the character	of business conducted in Rhode Island		
RI	Christian Con	nmunity Center		
5. Principal office address	C 1 1	City	State RI	Zip
282 Samuel	Crorton Avenue	Warwick RI 02889		02889
6. LIST ALL OFFICERS (N.	AMES AND ADDRESSES) ("X" BOX FOR	RATTACHMENT)		and the last transfer of the con-
President Name	1 1 2	Vice-President Name		-
and any low in 1	Kabupated De money a come gray or a more	Kanth W. Wa	Kenneth W. Wallette, TK.	
Street Address	<u> </u>	Street Address	and the second of the second 	
	ror Ton Avenup	168 RIVER ST.		
City	State Zip	City	State	Zip
Warwick	KT 07883	Warwick	RI	07888
Secretary Name	C	Treasurer Name		10. 50.99
Jessica L.	Dequeira			
Street Address 266 Sutton Av	Place P	Street Address		
City	State Zip	City	State	Zip #
East Providence	RI 02914		State	Zip +
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISL	AND CORPORATIONS MUST LIST NO	LI ESS THAN	THREE TO SIDE TABO
	EM) 🔀 🔻 🖟 🖂 🖂	Charles de la company de la co	1100	
Director Name		Director Name		5 2
Taylor Britti	<u>5</u>	Jessica Sequeira		M
Street Address	.1 /	Street Address		
282 Samuel b.	orton Avenue	266 Sutton Avenue	e	
City Warlatic K	State PI Zip O2889	East Providence	State RI	Zip
Director Name	103181	Director Name	1 1/4	02914
Taunica Cerul	lo	John Gibson		
Street Address		Street Address		-
97 Weslevan.	Avenue	1 - 1 1/ 8/	rive	
City	State Zip	City	State	Zip
W WY WICK 8. REGISTERED AGENT IN I	1 Rt 107888	Worth Kingstown	RI	0 2852
		KIND KIND OF BUILDING SECTION AND ASSESSED.		
This report would	y of record in the Office of the Secretary	y of State. Changes require filing Form	n 641.	
i nis report must b	e signed by either the President, Vice-Pres	sident, Secretary, Assistant Secretary, Tr	easurer, Receiv	/er or Trustee

File Date Check No. By: FOR SECRETARY OF STATE USE ONLY Form No. 631 Revised: 05/2012	JUN 04 2014 225 008	Under penalty of perjury, I declare and affirm that I have this report, including any accompanying schedules and and that all statements contained between are true and consideration of Officer Signature of Officer Print or Type, Name of Officer Title of Officer	statements
nevișeu: U3/2012		Title of Officer	

Director

Dean Isabella 14 Westmore land Street Narragansett, RI 02882.