



**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

# 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. <b>105201</b>		2. Exact name of the Corporation <b>GABRIEL'S TRUMPET CHRISTIAN BOOK STORE, INC.</b>			
3. State of Incorporation <b>RHODE ISLAND</b>		4. Brief description of the character of business conducted in Rhode Island <b>CHRISTIAN STORE FOR BOOKS, VIDEOS, GIFTS AND OTHER CHRISTIAN ORIENTED ITEMS</b>			
5. Principal office address <b>477 WASHINGTON STREET</b>		City <b>COVENTRY</b>	State <b>RI</b>	Zip <b>02816</b>	
President Name <b>FATHER MICHAEL KELLEY</b>			Vice-President Name <b>FATHER THOMAS WOODHOUSE</b>		
Street Address <b>ST. AGATHA'S RECTORY, 34 JOFFRE STREET</b>			Street Address <b>STS. JOHN AND PAUL RECTORY, 341 SO. MAIN ST.</b>		
City <b>WOONSOCKET</b>	State <b>RI</b>	Zip <b>02895</b>	City <b>COVENTRY</b>	State <b>RI</b>	Zip <b>02816</b>
Secretary Name <b>ARTHUR G. CAPALDI</b>			Treasurer Name <b>GREGORY LABOISSONNIERE</b>		
Street Address <b>1035 MAIN STREET</b>			Street Address <b>131 COLVINTOWN ROAD</b>		
City <b>COVENTRY</b>	State <b>RI</b>	Zip <b>02816</b>	City <b>COVENTRY</b>	State <b>RI</b>	Zip <b>02816</b>
7. LIST ALL DIRECTORS (NAME AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS. <input type="checkbox"/> BOX FOR ATTACHMENT					
Director Name <b>FATHER MICHAEL KELLEY</b>			Director Name <b>FATHER THOMAS WOODHOUSE</b>		
Street Address <b>ST. AGATHA'S RECTORY, 34 JOFFRE STREET</b>			Street Address <b>STS. JOHN AND PAUL RECTORY, 341 SO. MAIN ST.</b>		
City <b>WOONSOCKET</b>	State <b>RI</b>	Zip <b>02895</b>	City <b>COVENTRY</b>	State <b>RI</b>	Zip <b>02816</b>
Director Name <i>Arthur G. Capaldi</i>			Director Name <i>Gregory Laboissonniere</i>		
Street Address <i>1035 Main Street</i>			Street Address <i>131 Colvintown Road</i>		
City <i>Coventry</i>	State <b>RI</b>	Zip <i>02816</i>	City <i>Coventry</i>	State <b>RI</b>	Zip <i>02816</i>
<b>REGISTERED AGENT IN RHODE ISLAND</b>					
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, duly Authorized Representative, Receiver or Trustee

File Date: \_\_\_\_\_  
 Check No. \_\_\_\_\_  
 BY \_\_\_\_\_  
 FOR SECRETARY OF STATE USE ONLY

**MAILED**

**JUN 06 2014**

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.

*Father Michael Kelley*      *5-8-14*  
 Signature of Officer or Authorized Representative      Date

**BY** *0962* **FATHER MICHAEL KELLEY**

Print or Type Name of Officer or Authorized Representative