



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. 000068241

2. Name of Corporation GOSPEL TABERNACLE OUTREACH MINISTRIES INC.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 145 OAKLAND AVENUE

City or Town: PROVIDENCE

State: RI Zip: 02908 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

BOOK STORE/GIFT, NOVELTY AND SOUVENIER SHOP.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	ANDY STUPPARD MR.	39 HALBORN STREET MATTAPAN, MA 02126 USA
SECRETARY	FRANCES HAYES MRS.	27 CHERRY ROAD CRANSTON, RI 02905 USA
PRESIDENT	MARILYN LASSITER	42 WOODMAN STREET

		PROVIDENCE, RI 02907 USA
VICE PRESIDENT	MARGIE STUPPARD MRS	39 HALBORN STREET MATTAPAN, MA 02126 USA
DIRECTOR	RAY FERRARA MR.	104 STAMFORD AVE. PROVIDENCE, RI 02907 USA
DIRECTOR	MARY FERRARA	104 STAMFORD AVE. PROVIDENCE, RI 02907 USA
DIRECTOR	PELHAM PIERCE	98 JAPONICA ST. PAWTUCKET, RI 02860 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**

REV. MARILYN LASSITER 145 OAKLAND AVENUE PROVIDENCE , RI 02908

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

Signed this 21 Day of July, 2014 at 7:56:19 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 FRANCES HAYES
Signature of Authorized Person

Form No. 631
Revised 09/07