

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. 000030957

2. Name of Corporation Chapel Street Congregational Church

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 185 CHAPEL STREET

P.O. BOX 366

City or Town: LINCOLN State: RI Zip: 02865 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

CONGREGATIONAL UNITED CHURCH OF 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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	WALTER DUCHARME	1270 MENDON ROAD CUMBERLAND, RI 02864 USA
TREASURER	PATRICIA DRISKO	13 ROSEMONT AVENUE PAWTUCKET, RI 02861 USA

CLERK	KATHRYN BROWN	1797 LOUISQUISSET PIKE LINCOLN, RI 02865 USA
VICE PRESIDENT	PAULINE TUCKER	1922 OLD LOUISQUISSET PIKE LINCOLN, RI 02865 USA
DIRECTOR	ROBERT MATHEWSON	70 CARRIAGE DRIVE LINCOLN, RI 02865 USA
DIRECTOR	ROBIN PROULX	15 LAKEVIEW AVENUE PAWTUCKET, RI 02860 USA
DIRECTOR	ROBERT DRISKO	13 ROSEMONT AVENUE PAWTUCKET, RI 02861 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

AMY VINCENZI 185 CHAPEL STREET P.O. BOX 366 LINCOLN, RI 02865

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

Signed this 2 Day of August, 2014 at 7:24:22 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 PATRICIA DRISKO

Signature of Authorized Person

Form No. 631 Revised 09/07

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