



**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: 2015

1. Corporate ID No. 000106536

2. Name of Corporation CAPSTONE MINISTRIES INCORPORATED

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 16 7TH STREET

City or Town: PROVIDENCE State: RI Zip: 02906 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

TO PREACH THE GOSPEL 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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
PRESIDENT	FEMI OWOYEMI BISHOP	16 7TH STREET PROVIDENCE, RI 02906 USA
SECRETARY	MODUPE MARGARET OWOYEMI MRS	16 7TH STREET PROVIDENCE, RI 02906 USA
DIRECTOR	JOANNE G AVERY MRS.	20 BINFORD STREET

		LINCOLN, RI 02865 USA
DIRECTOR	VICTOR I. ADEGBESAN MR	195 HIGH SERVICE STREET N. PROVIDENCE, RI 02904 USA
DIRECTOR	CAROLINE A. ADEGUN MRS	159 PUTNAM STREET E. PROVIDENCE, RI 02914 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**

PASTOR FEMI OWOYEMI 16 7TH STREET PROVIDENCE , RI 02906

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

Signed this 26 Day of May, 2015 at 4:37:14 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 FEMI OWOYEMI
Signature of Authorized Person

Form No. 631
Revised 09/07

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