



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 **2015**

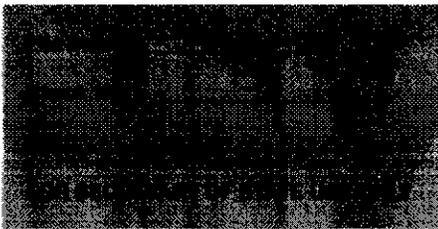
Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 26202		2. Exact name of the Corporation Lakewood Baptist Church			
3. State of Incorporation RI		4. Brief description of the character of business conducted in Rhode Island Conducting Religious Services and Religious Education			
5. Principal office address 255 Atlantic Ave.			City Warwick	State RI	Zip 02888
President Name Janice Cobb (Moderator)			Vice-President Name Brian Cobb (Assistant Moderator)		
Street Address 166 Puritan Dr.			Street Address 52 Larkin Ave.		
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 02889
Secretary Name Cecily Dohthit			Treasurer Name Lincoln Smith, Jr.		
Street Address 336 Red Chimney Dr.			Street Address 175 Adams St.		
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02888
Director Name Janice Cobb (Moderator)			Director Name Brian Cobb (Assistant Moderator)		
Street Address 166 Puritan Dr.			Street Address 52 Larkin Ave.		
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 02889
Director Name Cecily Dohthit			Director Name Lincoln Smith, Jr.		
Street Address 336 Red Chimney Dr.			Street Address 175 Adams St.		
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02888

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



FILED

JUN 10 2015

BY

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.

Lincoln Smith, Jr. 6/8/15
 Signature of Officer or Authorized Representative Date

Lincoln Smith, Jr.
 Print or Type Name of Officer or Authorized Representative