



**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. <b>26775</b>		2. Exact name of the Corporation <b>Immanuel Baptist Church</b>			
3. State of Incorporation <b>R.I.</b>		4. Brief description of the character of business conducted in Rhode Island <b>Preaching, Teaching and Counseling From The Bible</b>			
5. Principal office address <b>73 Green Street</b>		City <b>Pawtucket</b>		State <b>R.I.</b>	Zip <b>02860</b>
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <b>Rev. Frederick A. Bryden</b>			Vice-President Name <b>Charles Ross</b>		
Street Address <b>73 Green Street</b>			Street Address <b>42 Angle Street</b>		
City <b>Pawtucket</b>	State <b>R.I.</b>	Zip <b>02860</b>	City <b>East Providence</b>	State <b>R.I.</b>	Zip <b>02914</b>
Secretary Name <b>Carole Williams</b>			Treasurer Name <b>Raymond E. Dupre</b>		
Street Address <b>146 Smart Street</b>			Street Address <b>14 Lanesborough Street</b>		
City <b>Providence</b>	State <b>R.I.</b>	Zip <b>02904</b>	City <b>Pawtucket</b>	State <b>R.I.</b>	Zip <b>02861</b>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS <b>MUST</b> LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name <b>Norton Wright</b>			Director Name <b>Tino Santos</b>		
Street Address <b>47 Edgeworth Street</b>			Street Address <b>68 Carpenter Street</b>		
City <b>Providence</b>	State <b>R.I.</b>	Zip <b>02904</b>	City <b>Pawtucket</b>	State <b>R.I.</b>	Zip <b>02860</b>
Director Name <b>Richard Williams</b>			Director Name <b>NONE</b>		
Street Address <b>146 Smart Street</b>			Street Address		
City <b>Providence</b>	State <b>R.I.</b>	Zip <b>02904</b>	City	State	Zip
8. REGISTERED AGENT IN RHODE ISLAND					
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

BY 3251

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.

Raymond E. Dupre 6/20/15  
 Signature of Officer or Authorized Representative Date

Raymond E. Dupre  
 Print or Type Name of Officer or Authorized Representative