



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 2013

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. 787804		2. Exact name of the Corporation Kingdom Seekers Fellowship International, Inc.	
3. State of Incorporation RI		4. Brief description of the character of business conducted in Rhode Island Church, worship services and Bible Studies	
5. Principal office address PO Box 4277 Providence RI 02904		City Providence	State RI
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
President Name Carson Byers		Vice-President Name Andrew Johnson	
Street Address 198 Algonquin Drive		Street Address 967 Mill Creek Road	
City Warwick	State RI	City Bellville	State TX
Zip 02888		Zip 77418	
Secretary Name Mary-Beth Hubbard		Treasurer Name Mary-Beth Hubbard	
Street Address 82 Summit Street		Street Address 82 Summit Street	
City East Providence	State RI	City East Providence	State RI
Zip 02914		Zip 02914	
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
Director Name Carson Byers		Director Name Andrew Johnson	
Street Address 198 Algonquin Drive		Street Address 967 Mill Creek Road	
City Warwick	State RI	City Bellville	State TX
Zip 02888		Zip 77418	
Director Name Mary-Beth Hubbard		Director Name	
Street Address 82 Summit Street		Street Address	
City East Providence	State RI	City	State
Zip 02914		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

FILED

JUN 29 2015

File Date

Check No

By:

FOR SECRETARY OF STATE USE ONLY

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.

Carson Byers
Signature of Officer or Authorized Representative

Date

6/29/2015

Carson Byers
Print or Type Name of Officer or Authorized Representative