



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. 000033273

2. Name of Corporation Christ Church of Deliverance No. 2, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 232 LOCKWOOD STREET

City or Town: PROVIDENCE

State: RI Zip: 02905 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 232 LOCKWOOD STREET

City or Town: PROVIDENCE State: RI Zip: 02905 Country: UNI

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO CONDUCT RELIGIOUS SERVICES, TO GIVE RELIGIOUS INSTRUCTION TO THE COMMUNITY

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
TREASURER	TIFFANY P RHULE	1231 SMITH STREET, APT 303 PROVIDENCE, RI 02908 USA
SECRETARY	MICHAEL SHEPARD	234 ELRIDGE ST CRANSTON, RI 02910 USA

PRESIDENT	WILLIE F THOMAS	6 WESTERN HILLS LANE, UNIT #3203 CRANSTON, RI 02921- USA
VICE PRESIDENT	SARA J THOMAS	6 WESTERN HILLS LANE, UNIT # 3203 CRANSTON, RI 02907 USA
DIRECTOR	FRANK THOMAS	232 PROVIDENCE, RI 02907

**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**

WILLIE F. THOMAS 232 LOCKWOOD STREET PROVIDENCE , RI 02905

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

Signed this 3 Day of July, 2015 at 12:00:56 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 WILLIE F. THOMAS
Signature of Authorized Person

Form No. 631
Revised 09/07

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