



**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. 000135684

2. Name of Corporation Oasis Christian Church

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 669 ELMWOOD AVENUE, 2ND FLOOR B6

City or Town: PROVIDENCE

State: RI Zip: 02907 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

INDEPENDENT CHRISTIAN CHURCH

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	SARAH REEVES	138 WHITMARSH APT.2 PROVIDANCE, RI 02907 USA
DIRECTOR	JULIE QUAYE	8 MELTON S TAPT 9 PAWTUCKET, RI 02860 USA
DIRECTOR	WINSTON BEDELL BEDELL	32 STICER ST

		NORTH PROVIDENT, RI 02861 USA
VICE PRESIDENT	CHRISTIC MARBLOW	8 MELTON ST. APT. 9 PAWTUCKET, RI 02860 USA
SECRETARY	EDWARD PAYNE	157 SHAND AVE. WARWICK, RI 02908 USA
PRESIDENT	PETER K SARMIE	63 WEBSTER ST APT 31 PAWTUCKET, RI 02861 USA
DIRECTOR	EMMANUEL PAYNE	157 SHAND AVE. WARWICK, RI 02889 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

PETER SARMIE 669 ELMWOOD AVENUE, 2ND FLOOR B6 PROVIDENCE , RI 02907

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 7:33:01 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 PETER SARMIE
Signature of Authorized Person

Form No. 631
Revised 09/07