



**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.** 000051899

**2. Name of Corporation** Lighthouse Family Worship Centre

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 322 EDDIE DOWLING HWY.

City or Town: NORTH SMITHFIELD

State: RI Zip: 02896 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**

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	JOHN P FERAGNE	81 CRESCENT ROAD PAWTUCKET, RI 02861 USA
SECRETARY	BARBEL PRIOR	16 COLONIAL AVE CUMBERLAND, RI 02864 USA
PRESIDENT	REV JAMES P PRIOR	16 COLONIAL AVENUE

DIRECTOR	REV JAMES P PRIOR	CUMBERLAND, RI 02864 USA 16 COLONIAL AVENUE CUMBERLAND, RI 02864 USA
DIRECTOR	BARBEL PRIOR	16 COLONIAL AVENUE CUMBERLAND, RI 02864 USA
DIRECTOR	JOHN P FERAGNE	81 CRESCENT ROAD PAWTUCKET, RI 02861 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**

REV. JAMES PRIOR 22 CLARK STREET P.O. BOX 7578 CUMBERLAND , RI 02864

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

**Signed this 8 Day of July, 2015 at 12:44:34 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 JOHN P FERAGNE  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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