



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. 000029701

2. Name of Corporation WESLEY UNITED METHODIST CHURCH, LINCOLN, RHODE ISLAND

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 55 WOODLAND STREET

City or Town: LINCOLN

State: RI Zip: 02865 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

WORSHIP, EDUCATION, SERVICE TO THE WORLD

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
PRESIDENT	GLENN GRAHAM	6 HUGHES DRIVE GREENVILLE, RI 02828 USA
TREASURER	CRYSTAL WILD	PO BOX 835 GREENVILLE, RI 02828 USA

DIRECTOR	BRUCE ANDREWS	1275 SMITHFIELD DRIVE LINCOLN, RI 02865 USA
DIRECTOR	EARL ANDREWS	PO BOX 42 ALBION, RI 02802 USA
DIRECTOR	MARTY BRIGGS	597 NEWPORT AVE S. ATTLEBORO, MA 02703 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

STEPHEN HARTEN RATCLIFFE HARTEN BURKE & GALAMAGA 40 WESTMINSTER ST., 7TH FLOOR
PROVIDENCE , RI 02903

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

Signed this 15 Day of July, 2015 at 12:05:52 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 CRYSTAL WILD
Signature of Authorized Person

Form No. 631
Revised 09/07

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