



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 **2015**

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. 32136		2. Exact name of the Corporation Sts. Vartanantz Armenian Apostolic Church			
3. State of Incorporation RI		4. Brief description of the character of business conducted in Rhode Island Operation of a Church			
5. Principal office address 402 Broadway		City Providence		State RI	Zip 02909
6. LIST <u>ALL</u> OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
President Name Hagop Khatchadourian, Chairman			Vice-President Name Jason Simonian		
Street Address 16 Kiki Circle			Street Address 32 Coach Road		
City Cranston	State RI	Zip 02921	City N. Attelboro	State MA	Zip 02760
Secretary Name Margaret Stepanian			Treasurer Name Harout Taraksian		
Street Address 37 Richter Street			Street Address 100 Midvale Avenue		
City Providence	State RI	Zip 02908	City Cranston	State RI	Zip 02920
7. LIST <u>ALL</u> DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS <u>MUST</u> LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) ☒					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	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 ✓

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.

Signature of Officer or Authorized Representative

Date

Print or Type Name of Officer or Authorized Representative

10# 32136

Sts. Vartanantz Armenian Apostolic Church
Providence, Rhode Island 02909

2014-2015 Board of Trustees Members

Hagop Khatchadourian, Chairman
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H: 823-0921 W: 268-2613
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sasoun1@yahoo.com

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100 Midvale Avenue
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