RI SOS Filing Number: 201577373850 Date: 09/02/2015 4:00 PM

**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. | 2. Exact name of the Corporation |
|---|---|
| 161179 | Life Change Christian Church |
| 3. State of Incorporation | 4. Brief description of the character of business conducted in Rhode Island |
| R.I. | Religious Education |

| 5. Principal office address | City | State | Zip |
|---|---|---|---|
| 45 Lincoln Ave | Cranston | RI | 02920 |

**6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT)** ☐

| President Name | Vice-President Name |
|---|---|
| CARL JEFFERSON | Tamica Jefferson |
| Street Address | Street Address |
| 43 Lincoln Ave | 43 Lincoln Ave |
| City / State / Zip | City / State / Zip |
| Cranston / RI / 02920 | Cranston / RI / 02920 |
| Secretary Name | Treasurer Name |
| Brenda Henry | Kristina Price |
| Street Address | Street Address |
| 825 Pontiac Ave | 2015 Broad St |
| City / State / Zip | City / State / Zip |
| cranston / RI / 02910 | Cranston / RI / 02905 |

**7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT)** ☐

| Director Name | Director Name |
|---|---|
| Willie James | Lois James |
| Street Address | Street Address |
| 10 Ranley Rd | 10 Ranley Rd |
| City / State / Zip | City / State / Zip |
| Mattapan / MA / 02126 | Mattapan / MA / 02126 |
| Director Name | Director Name |
| Jeanette Lewis | |
| Street Address | Street Address |
| 635 Park Ave | |
| City / State / Zip | City / State / Zip |
| Woonsocket / RI / 02895 | |

**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.**

RECEIVED 2015 SEP -2 PM 2:40 SECRETARY OF STATE CORPORATIONS DIV.

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

FILED
SEP 02 2015
BY 7201642

**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

CARL Jefferson
Print or Type Name of Officer or Authorized Representative

**Form No. 631**
**Revised: 04/2014**
124937-1-1056936