



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.

RECEIVED  
 SECRETARY OF STATE  
 CORPORATIONS DIV  
 2016 FEB 29 AM 11:57

1. Entity ID No. <b>52668</b>		2. Exact name of the Corporation <b>SHELDON STREET CHURCH</b>	
3. State of Incorporation <b>RHODE ISLAND</b>		4. Brief description of the character of business conducted in Rhode Island <b>RELIGIOUS MISSIONS</b>	
5. Principal office address <b>51 Sheldon St.</b>		City <b>PROVIDENCE</b>	State <b>RI</b>
		Zip <b>02906</b>	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
President Name <b>VERA WILSON</b>		Vice President Name <b>JACQUELINE WOODS</b>	
Street Address <b>48 FIRGLADE AVE</b>		Street Address <b>34 MYSTIC ST.</b>	
City <b>PROVIDENCE</b>	State <b>RI</b>	Zip <b>02906</b>	City <b>PROVIDENCE</b>
			State <b>RI</b>
			Zip <b>02905</b>
Secretary Name <b>MARSHA SMITH</b>		Treasurer Name <b>SYLVIA WILSON</b>	
Street Address <b>86 CORINTH ST.</b>		Street Address <b>871 HOPE ST.</b>	
City <b>PROVIDENCE</b>	State <b>RI</b>	Zip <b>02907</b>	City <b>PROVIDENCE</b>
			State <b>RI</b>
			Zip <b>02906</b>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
Director Name <b>ALLEN WHITE</b>		Director Name <b>RAYMOND THOMPSON</b>	
Street Address <b>20 HILLSIDE DR.</b>		Street Address <b>29 MELISSA ST.</b>	
City <b>WARWICK</b>	State <b>RI</b>	Zip <b>02889</b>	City <b>PROVIDENCE</b>
			State <b>RI</b>
			Zip <b>02909</b>
Director Name <b>EARL ARCHIBALD</b>		Director Name <b>JOYCE O'CONNOR</b>	
Street Address <b>176 FIFTH ST.</b>		Street Address <b>105 GALLUP ST.</b>	
City <b>PROVIDENCE</b>	State <b>RI</b>	Zip <b>02906</b>	City <b>PROVIDENCE</b>
			State <b>RI</b>
			Zip <b>02905</b>
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

File Date \_\_\_\_\_  
 Check No \_\_\_\_\_  
 By: \_\_\_\_\_  
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**FILED**

FEB 29 2016

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.

Sylvia Wilson 2/24/16  
 Signature of Officer or Authorized Representative Date

SYLVIA WILSON  
 Print or Type Name of Officer or Authorized Representative

2015