



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. <u>29021</u>		2. Exact name of the Corporation <u>Church of the Mediator in Providence</u>			
3. State of Incorporation <u>RI</u>		4. Brief description of the character of business conducted in Rhode Island <u>church - spiritual education + service</u>			
5. Principal office address <u>50 Rounds Ave</u>		City <u>Providence</u>		State <u>RI</u>	Zip <u>02907</u>
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <u>Donald Harper</u>			Vice-President Name		
Street Address <u>11 E Manning St.</u>			Street Address		
City <u>Providence</u>	State <u>RI</u>	Zip <u>02906</u>	City	State	Zip
Secretary Name <u>Paul J. McNeil</u>			Treasurer Name <u>Donald Harper</u>		
Street Address <u>50 Rounds Ave</u>			Street Address <u>11 E. Manning St.</u>		
City <u>Providence</u>	State <u>RI</u>	Zip <u>02907</u>	City <u>Providence</u>	State <u>RI</u>	Zip <u>02906</u>
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 <u>Robert Goodwin</u>			Director Name <u>Lynn Martin</u>		
Street Address <u>2 Grant St.</u>			Street Address <u>14 Wilson St.</u>		
City <u>Johnston</u>	State <u>RI</u>	Zip <u>02919</u>	City <u>Providence</u>	State <u>RI</u>	Zip <u>02905</u>
Director Name <u>Don Tassone</u>			Director Name <u>Donald Harper</u>		
Street Address <u>80 Rounds Ave</u>			Street Address <u>11 E. Manning St.</u>		
City <u>Providence</u>	State <u>RI</u>	Zip <u>02907</u>	City <u>Providence</u>	State <u>RI</u>	Zip <u>02906</u>
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:	
FOR SECRETARY OF STATE USE ONLY	

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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.

Donald Harper 2/26/16
Signature of Officer or Authorized Representative Date

Donald Harper - President
Print or Type Name of Officer or Authorized Representative