



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: 2016

1. Corporate ID No. 000150542

2. Name of Corporation Seven Seas Ministries, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 170 BRADFORD ROAD

City or Town: BRADFORD

State: RI Zip: 02808 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

CHRISTIAN OUTREACH. BIBLICAL COUNSEL AND TEACHING.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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
TREASURER	ELLIE SNOW	170 BRADFORD RD. BRADFORD, RI 02808 USA
PRESIDENT	CURT SNOW	170 BRADFORD ROAD BRADFORD, RI 02808- USA
VICE PRESIDENT	ELLIE SNOW	170 BRADFORD RD.

		BRADFORD, RI 02808 USA
DIRECTOR	AMANDA BASSETTI	11 STARR RD. UNCASVILLE, CT 06382 USA
DIRECTOR	ROBERTS LIARDON	1111 3RD AVE. WEST BRADENTON, FL 34205 USA
DIRECTOR	SHEENA GENCARELLE	13 FIELDSTONE WAY WESTERLY, RI 02891 USA
DIRECTOR	CAROL LIARDON	1111 3RD AVE. WEST BRADENTON, FL 34205 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**

CURT SNOW 170 BRADFORD ROAD P.O. BOX 272 BRADFORD , RI 02808

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

**Signed this 16 Day of May, 2016 at 10:11:21 AM 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 CURT SNOW  
Signature of Authorized Person

Form No. 631  
Revised 09/07