



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. 000028976

2. Name of Corporation The Slatersville Congregational Church

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 25 GREEN STREET
P.O. BOX 808

City or Town: SLATERSVILLE State: RI Zip: 02876 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

CHURCH

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
PRESIDENT	MARTHA HUNT	40 NORTH K STREET JOHNSTON, RI 02919 USA
TREASURER	STEPHEN WHITNEY	768 WOONSOCKET HILL RD. N. SMITHFIELD, RI 02896 USA

SECRETARY	DORIS BLACKLEDGE	590 GREENVILLE RD. N. SMITHFIELD, RI 02896 USA
DIRECTOR	DAVID ROGERS	12 LINCOLN DRIVE NORTH SMITHFIELD, RI 02896 USA
DIRECTOR	JEAN MEO	11 TALL TIMBER TRAIL N. SMITHFIELD, RI 02896 USA
DIRECTOR	MARGARET HANOIAN	4 MARA LANE N. SMITHFIELD, RI 02896 USA
DIRECTOR	ALLISON PEIRCE	65 GREAT ROAD N. SMITHFIELD, RI 02896 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

MARTHA HUNT CORNER OF 13 SCHOOL STREET & GREEN STREET P.O. BOX 808
SLATERSVILLE , RI 02876

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

Signed this 17 Day of May, 2016 at 2:18:46 PM 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 MARTHA HUNT, MODERATOR
Signature of Authorized Person

Form No. 631
Revised 09/07

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