



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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: 2016

Filing period: June 1 - June 30

Filing Fee: \$20.00 *FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID Number		2. Exact Name of the Corporation			
86890		Benjamin Church Development Corp.			
3. State of Incorporation		4. Brief description of the character of business conducted in Rhode Island			
Rhode Island		To develop and manage low income housing.			
5. Principal Office Address		City	State	Zip	
Manor Drive		Bristol	RI	02809	
6. List ALL Officers (names and addresses) ☐ Check the box to indicate an attachment					
President Name Gerald P. Romano		Vice-President Name Domenic C. Canna			
Street Address Unit A-1 Bristol Woods Drive		Street Address 117 Beach Road			
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
Secretary Name M. Candace Pansa		Treasurer Name John M. Day			
Street Address 46 Clipper Way		Street Address 31 Michael Drive			
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
7. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. ☒ Check the box to indicate an attachment					
Director Name Gerald P. Romano		Director Name John M. Day			
Street Address Unit 1-A Bristol Woods Drive		Street Address 31 Michael Drive			
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
Director Name Domenic C. Canna		Director Name John E. Faria			
Street Address 117 Beach Road		Street Address 1039 Hope Street			
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
8. Registered Agent in Rhode Island. This information is shown of record in the Department of State Office and is not to be changed without filing a statement of change with the Department of State. Under penalty of perjury, I declare that the information provided is true and correct, and that all documents contained herein are true and correct. This report must be signed by either the President, Vice President, Secretary, Treasurer, or a duly authorized representative of the corporation.					
Name of Officer/Authorized Representative M. Candace Pansa, Secretary				Date 05/12/2016	
Signature of Officer/Authorized Representative				SIGN DOCUMENT HERE <i>M Candace Pansa</i>	

FILED
MAY 24 2016
BY 015677 DS

Additional Directors

Charles B. Millard
620 Hope Street
Bristol, RI 02809

Linda Silveira
7 Howe Street
Bristol, RI 02809

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MAY 24 2016

BY

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86890 RD