



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.** 000033913

**2. Name of Corporation** Trinity Assembly of God, Inc.

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 2119 HARTFORD AVENUE

City or Town: JOHNSTON

State: RI Zip: 02919 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**

RELIGIOUS/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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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
TREASURER	ALBERT S. DECUBELLIS MR.	215 PHEASANT DRIVE CRANSTON, RI 02920 USA
SECRETARY	JUSTIN HARRY LUONGO	1421 DOUGLAS AVE. N. PROV., RI 02904 USA
PRESIDENT	THOMAS FAVA	2119 HARTFORD AVENUE

		JOHNSTON, RI 02919 USA
DIRECTOR	RICHARD C. SHEETS MR.	37 BUCHANAN STREET JOHNSTON, RI 02919 USA
DIRECTOR	RICHARD R. OSTEEN MR.	1025 SCITUATE AVENUE CRANSTON, RI 02921 USA
DIRECTOR	MICHAEL JOSEPH SUSI	19 ROTARY DR. JOHNSTON, RI 02919 USA
DIRECTOR	TIMOTHY ANTHONY FAVA	94 WOODWARD ST. DANIELSON, CT 06329 USA
DIRECTOR	LUIS MARRERO	42 BRIGHTRIDGE AVE. EAST PROV., RI 02914 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**

BRUCE R. CHADWICK 2119 HARTFORD AVENUE JOHNSTON , RI 02919

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

**Signed this 1 Day of June, 2016 at 6:14:12 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 MICHAEL J. SUSI  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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