



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. 000535765

2. Name of Corporation Grace Community Baptist Church

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 621 WOONASQUATUCKET AVE.

City or Town: NORTH PROVIDENCE

State: RI Zip: 02911 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

TO BE A ORGANIZATION WHICH GATHERS TOGETHER AS A LOCAL CHURCH
PARTICIPATING IN RELIGIOUS EXERCISES.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	ROBERT L VENTURA	58 VERSAILLES ST CRANSTON, RI 02920 USA
DIRECTOR	ROBERT L VENTURA	58 VERSAILLES STREET CRANSTON, RI 02920 USA

DIRECTOR	JOHN Z BUCKLEY III	29 WHISPERING PINES TER. WEST GREENWICH, RI 02817 USA
DIRECTOR	ROBERT W TETRAULT JR	117 RODGERS ROAD PUTNAM, CT 06260 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

ROBERT L VENTURA 58 VERSAILLES STREET CRANSTON , RI 02920

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

Signed this 7 Day of June, 2016 at 2:25:17 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 RICHARD A. CARL
Signature of Authorized Person

Form No. 631
Revised 09/07

© 2007 - 2016 State of Rhode Island and Providence Plantations
All Rights Reserved