




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

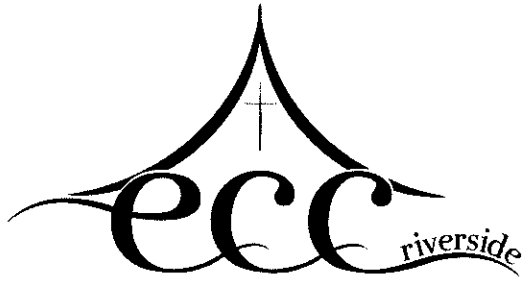
Non-Profit Corporation Annual Report for the year: 2016

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			
000026922		The Evangelical Covenant Church of Riverside Rhode Island			
3. State of Incorporation		4. Brief description of the character of business conducted in Rhode Island			
RI		CHURCH			
5. Principal Office Address		City	State	Zip	
165 ROUNDS AVENUE		RIVERSIDE	RI	02915	
6. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name HAROLD BURGOYNE			Vice-President Name ALICE LUX FAWZI		
Street Address 1 GREENBRIER CT W			Street Address 419 WAYLAND AVENUE		
City SMITHFIELD	State RI	Zip 02828	City PROVIDENCE	State RI	Zip 02906
Secretary Name JESSICA MULLINS			Treasurer Name DAVID PALMER		
Street Address 34 PEACE PIPE TRAIL			Street Address 2 MYLES STREET		
City SMITHFIELD	State RI	Zip 02917	City BARRINGTON	State RI	Zip 02806
7. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input checked="" type="checkbox"/>					
Director Name KRYSTAL ALVES AMOROSO			Director Name SARAH ATWOOD		
Street Address 46 N. HULL STREET, #1			Street Address 9 LINWOOD CT		
City EAST PROVIDENCE	State RI	Zip 02914	City WARREN	State RI	Zip 02885
Director Name CHRISTINE BEARD			Director Name PAUL BOWSER		
Street Address 94 DELWAY ROAD			Street Address 16 PALISADE LANE		
City EAST PROVIDENCE	State RI	Zip 02914	City BARRINGTON	State RI	Zip 02806
8. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative HAROLD BURGOYNE				Date 6/1/2016	
Signature of Officer/Authorized Representative  SIGN DOCUMENT HERE					

PILED
JUN 06 2016



The Evangelical Covenant Church of Riverside

165 Rounds Avenue
Riverside, Rhode Island 02915
Voice: 401-433-4356 Fax: 401-433-0065
www.eccriverside.org
office@eccriverside.org

ENTITY ID NO. 000026922

2016

ADDITIONAL DIRECTORS:

ELLEN BROOKS
60 CROWN AVENUE
RIVERSIDE, RI 02915

HOWARD BROOKS
60 CROWN AVENUE
RIVERSIDE, RI 02915

KEVIN DUARTE
74 GRIFFITH AVENUE
RIVERSIDE, RI 02915

BRIAN ESTRELLA
78 GRIFFITH AVENUE
RIVERSIDE, RI 02915

DAVID HALLIGAN
27 DIXON AVENUE
BRISTOL, RI 02809