

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS RECEIVED Office of the Secretary of State - Division of Business Services RECEIVED

Unice of the Secretary of State - Division of Business Services STATE

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov/business

## NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR \_ 2015

Filling Period: June 1 - June 30 • This report must be typed or printed legibly.

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

		·
1. Entity ID No.	2. Exact name of the Corporation	c C-2 111
000485894	CHRIST SPIRIT	UAL CHURCH OF GOD MINHSTRY
3. State of Incorporation	4. Brief description of the character of bu	usiness conducted in Rhode Island None Profit
10 5	organisation, fre	aching the word of God
K.I.	Bringing the brok	can heart do to the trong of fed &
5. Principal office address 316, Wal coff Street Per Anched R. T. 02860.		
6. LIST ALL OFFICERS (NAMES	S AND ADDRESSES) ("X" BOX FOR AT	
President Name	1 1 ladayan	Vice-President Name
Street Address	1 Herby Jega	Street Address Street
Street Address	call Street	316 Islakat the
City /	State Zip	City State Zip
" fewfucket	R.1. 02860	Perentucket R.I. 02860
Secretary Name	Aderiato	Trefasurer Name Touin Fachata
Street Address		Street Address
300, la	leeden Street	206, Messer Street.
City Perintueled	State R.T. 02860	Providence R.T. 02909
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT)		
Director Name		Director Name
Veter (	with toleph	Emmanuel Deramola
Street Address	les Avenue	33. Emmenel Street
City Can had Calle	State R.T. Zip	City Per Andret State 17. T. 57.8 Ca
Director Name		Director Name
Street Address		Street Address
Sueer Address Justice	1 Shopp	51 Ausurn Steel
City 85 Desixmoneth	State RI Zip C2909	City Per Anglest State T. Zip 28(3)
PEGISTEPEN ACENT IN PUC	DDE ISLAND	
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.		
<u> </u>		ent, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee
The report Heat 20 de	FILED	-
	JUN 0 8 2016	Under penalty of perjury, I declare and affirm that I have examined
File Date		) this report, including any accompanying schedules and statements,
Check No	BYCUL 276199	and that all statements contained herein are true and correct.
By:	95 <u>- 40 5</u> 10	Signature of Officer Date
FOR SECRETARY OF STATE	USE ONLY	MATHAMIE ADEGROTE GA
		Print or Type Name of Officer
Form No. 631 Revised: 05/2012		Title of Officer General Oller Sear