



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. 000846784

2. Name of Corporation The Feast: A church of Christ

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: PO BOX 29561

City or Town: PROVIDENCE State: RI Zip: 02909 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

THIS CORPORATION IS A RELIGIOUS CORPORATION AND IS NOT ORGANIZED FOR THE PRIVATE GAIN OF ANY PERSON. IT IS ORGANIZED UNDER THE NONPROFIT RELIGIOUS CORPORATION LAW EXCLUSIVELY FOR RELIGIOUS PURPOSES. THE SPECIFIC PURPOSE OF THIS CORPORATION IS TO BE A CHRISTIAN CHURCH WHICH WILL ENGAGE IN SUCH MINISTRIES AS CHURCH SERVICES, SCHOOLS AND EDUCATION, MUSIC, SPORTS, COMMUNITY SERVICES, PUBLIC PROGRAMS, AND AS MANY MINISTRIES AS THE CHURCH CAN ENVISION AND GOD WILL ENDOW TO BE OF BENEFIT TO THE PEOPLE OF THE CITY OF PROVIDENCE AND THE COUNTY OF PROVIDENCE. THE CORPORATION IS ORGANIZED EXCLUSIVELY FOR RELIGIOUS PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (OR THE CORRESPONDING SECTION OF ANY FUTURE FEDERAL INTERNAL REVENUE LAW). NOTWITHSTANDING ANY OTHER PROVISION OF THESE ARTICLES, THE CORPORATION SHALL NOT, EXCEPT TO AN INSUBSTANTIAL DEGREE, ENGAGE IN ANY ACTIVITIES OR EXERCISE ANY POWERS THAT ARE NOT IN FURTHERANCE OF THE PURPOSES OF THIS CORPORATION, AND THE CORPORATION SHALL NOT CARRY ON ANY OTHER ACTIVITIES NOT PERMITTED TO BE CARRIED ON (A) BY A

CORPORATION EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (OR THE CORRESPONDING SECTION OF ANY FUTURE FEDERAL INTERNAL REVENUE LAW), OR (B) BY A CORPORATION, CONTRIBUTIONS TO WHICH ARE DEDUCTIBLE UNDER SECTION 170(C)(2) OF THE INTERNAL REVENUE CODE (OR THE CORRESPONDING SECTION OF ANY FUTURE FEDERAL INTERNAL REVENUE LAW).

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	CALEB ANDREW BORCHERS	139 CHAPIN AVE. PROVIDENCE, RI 02909 USA
TREASURER	ALANA MARIE COTTRELL	6 HAMMOND ST. PROVIDENCE, RI 02909 USA
SECRETARY	EMILY ROSEN AUGER	1414 NARRAGANSETT BLVD. CRANSTON, RI 02905 USA
DIRECTOR	JORDAN THOMAS DANIEL	25 DEVEREUX ST. UNIT 207 PROVIDENCE, RI 02909 USA
DIRECTOR	FRAN WALLACE BORCHERS	139 CHAPIN AVE. PROVIDENCE, RI 02909 USA
DIRECTOR	BRUCE BATES	44 NATE WHIPPLE HWY CUMBERLAND, RI 02864 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**

CALEB A. BORCHERS 139 CHAPIN AVE PROVIDENCE , RI 02909

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

Signed this 13 Day of June, 2016 at 2:18:25 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 CALEB A. BORCHERS
Signature of Authorized Person

Form No. 631
Revised 09/07

