



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

Foreign Non-Profit
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. 000151004

2. Name of Corporation The Impact Movement

3. State of Incorporation

State: CA

4. Corporate Address in Rhode Island

No. and Street: N/A
City or Town: N/A State: RI Zip: 02888 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 618 E. SOUTH ST STE 500
City or Town: ORLANDO State: FL Zip: 32801 Country: US

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO ADVANCE THE GOSPEL OF JESUS CHRIST

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JAMES MCGEE III	PO BOX 607803 ORLANDO, FL 32860 USA
SECRETARY	REBECCA WALSTON	PO BOX 607803 ORLANDO, FL 32860 USA
CFO	GREGORY JAMES HERSEY	PO BOX 607803 ORLANDO, FL 32860 USA
DIRECTOR	ADRIAN BARFIELD	PO BOX 607803 ORLANDO, FL 32860 USA

DIRECTOR	MARLA FREDERICKS	PO BOX 607803 ORLANDO, FL 32860 USA
DIRECTOR	CARLA DAVIS	PO BOX 607803 ORLANDO, FL 32860 USA
DIRECTOR	TONYA TARPEH	PO BOX 607803 ORLANDO, FL 32860 US
DIRECTOR	GEORGE DUFFIN	PO BOX 607803 ORLANDO, FL 32860 USA
DIRECTOR	THOMAS FRITZ	PO BOX 607803 ORLANDO, FL 32860 USA
DIRECTOR	DENNIS TALBERT	PO BOX 607803 ORLANDO, FL 32860 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**

REGISTERED AGENT SOLUTIONS, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

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

Signed this 23 Day of June, 2016 at 4:06:02 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 GREGORY HERSEY
Signature of Authorized Person

Form No. 631
Revised 09/07

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