



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
 Office of the Secretary of State - Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

2016 JUN 29 PM 3:46  
 SECRETARY OF STATE  
 CORPORATIONS DIV.

**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2016**

Filing 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. <b>30565</b>		2. Exact name of the Corporation <b>Union Baptist Church Pawtucket R.I.</b>	
3. State of Incorporation <b>RI</b>		4. Brief description of the character of business conducted in Rhode Island <b>A church January Session 1893</b>	
5. Principal office address <b>50 Lupine Street Pawtucket RI 02860</b>			
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
President Name <b>Chinesta Alexander</b>		Vice-President Name <b>Kolu Johnson</b>	
Street Address <b>109 Ivy Street</b>		Street Address <b>84 Minto Street</b>	
City <b>Providence</b>	State <b>RI</b>	City <b>Providence</b>	State <b>RI</b>
Zip <b>02906</b>		Zip <b>02908</b>	
Secretary Name <b>Mary Stanley</b>		Treasurer Name <b>Loretta Goncalves</b>	
Street Address <b>25 Benedict Street</b>		Street Address <b>129 Cypress Street 1st floor</b>	
City <b>North Providence</b>	State <b>RI</b>	City <b>Providence</b>	State <b>RI</b>
Zip <b>02904</b>		Zip <b>02906</b>	
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
Director Name <b>Robert Hazard</b>		Director Name <b>Sheila Jackson</b>	
Street Address <b>30 Evergreen Street</b>		Street Address <b>10 McCausland Avenue</b>	
City <b>Pawtucket</b>	State <b>RI</b>	City <b>E. Providence</b>	State <b>RI</b>
Zip <b>02861</b>		Zip <b>02914</b>	
Director Name <b>Bernice Blackwell</b>		Director Name	
Street Address <b>309 Cahir Street</b>		Street Address	
City <b>Providence</b>	State <b>RI</b>	City	State
Zip <b>02903</b>		Zip	
8. REGISTERED AGENT IN RHODE ISLAND			

This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.  
 This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee

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.

File Date \_\_\_\_\_  
 Check No \_\_\_\_\_  
 By: \_\_\_\_\_

**FILED**

**Chinesta Alexander** 6-28-2016  
 Signature of Officer or Authorized Representative Date

FOR SECRETARY OF STATE USE ONLY  
**JUN 29 2016**

**Chinesta Alexander**  
 Print or Type Name of Officer or Authorized Representative

**C 10765922**