



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. 000520320

2. Name of Corporation Bethel World Outreach Church Providence, Rhode Island

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 122 JULIAN ST. APT1R

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

TO WIN THE LOST AT ALL COST; TO BE A WORSHIP CENTER WHERE LOVE IS DEMONSTRATED IN WORD AND DEED AND WHERE PEOPLE EXPERIENCE GENUINE CARE AND COMPASSION FOR ONE ANOTHER; TO BE A WORLD OUTREACH MINISTRY DIRECTLY INVOLVED IN TAKING THE GOSPEL TO THE FOUR CORNERS OF THE EARTH BY CONTRIBUTING HUMAN, MATERIAL, AND FINANCIAL RESOURCES TO ACCOMPLISH THIS END; TO PROVIDE EDUCATIONAL AND HUMANITARIAN ASSISTANCE.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address
-------	-----------------	---------

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	PATRICIA K. MARBEY	122 JULIAN STREET PROVIDENCE, RI 02909 USA
DIRECTOR	LYNETTE M. KUMEH	2205 SWEETBRIAR DRIVE MORRISTOWN, PA 19067 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

PATRICIA KATHLEEN MARBEY 20 WESTFIELD STREET PROVIDENCE , RI 02907

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

Signed this 8 Day of July, 2016 at 2:18:22 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 PATRICIA KATHLEEN MARBEY
Signature of Authorized Person

Form No. 631
Revised 09/07

© 2007 - 2016 State of Rhode Island and Providence Plantations
All Rights Reserved