

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2016

Non-Profit Corporation

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

CORPURATIONS OF	
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4. Entity ID Number	2 5		· · · ·		-		
1. Entity ID Number 28780	2. Exact name of the Corporation Chinese Christian Church of Rhode Island						
3. State of Incorporation	4. Brief description of the character of business conducted in Rhode Island						
Rhode Island	Church						
5. Principal Office Address			City	State	Zip		
333 Roosevelt Ave			Pawtucket	RI	02860		
6. List ALL officers (names and addresses) Check the box to indicate an attachment							
President Name Tze Ping Ng			Vice-President Name Louis Yip				
Street Address 76 Middle Rd			Street Address 71 Wingate Rd				
^{City} East Greenwich	State RI	^{Zip} 02818	^{City} Providence	State RI	^{Zip} 02906		
Secretary Name James Sung			Treasurer Name Eric Leung				
Street Address 2 Carriage Dr			Street Address 3 Lori Ellen Dr				
^{City} Lincoln	State RI	^{Zip} 02865	^{City} Lincoln	State RI	^{Zip} 02865		
7. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment							
Director Name Louis Yip			Director Name Tze Ping Ng				
Street Address 71 Wingate Rd			Street Address 76 Middle Rd				
City Providence	State RI	^{Zip} 02906	City East Greenwich	State RI	^{Zip} 02818		
Director Name Jame Sung			Director Name Eric Leung				
Street Address 2 Carriage Dr			Street Address 3 Lori Ellen Dr				
^{City} Lincoln	State RI	^{Zip} 02865	City Lincoln	State RI	^{Zip} 02865		
8. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.							
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.							
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.							
Name of Officer/Authorized Representative				Date	/		
Louis Yip			7/11	116			
Signature of Officer/Authorized Representative							
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MAIL TO:

Division of Business Services

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FORM 631 - Revised: 05/2016