



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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SECRETARY OF
CORPORATIONS

2016 JUL 11 AM 10:45

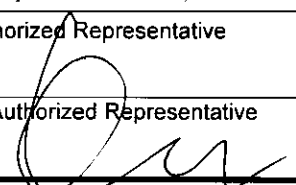
Annual Report for the year: 2016

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.

1. Entity ID Number 113031		2. Exact name of the Corporation Chinese Christian Cemetery of Rhode Island			
3. State of Incorporation Rhode Island		4. Brief description of the character of business conducted in Rhode Island To purchase and sell real estate for burial purpose only.			
5. Principal Office Address 333 Roosevelt Ave		City Pawtucket	State RI	Zip 02860	
6. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
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 <input type="checkbox"/>					
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.					
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</small>					
Name of Officer/Authorized Representative Louis Yip				Date 7/11/16	
Signature of Officer/Authorized Representative 					

SIGN DOCUMENT HERE

FILED 

JUL 11 2016

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

BY

