



State of Rhode Island and Providence Plantations

**Department of State - Business Services Division**

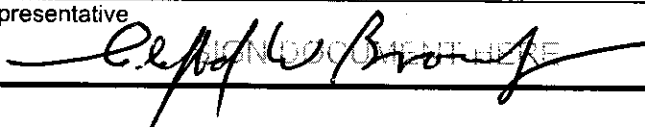
**Annual Report for the year:** 2016

**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.

|                                                                                                                                                                                                                  |                    |                                                                                                               |                                                                                         |                        |                     |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|---------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|------------------------|---------------------|
| 1. Entity ID Number<br><b>28695</b>                                                                                                                                                                              |                    | 2. Exact name of the Corporation<br><b>Chepachet Free Will Baptist Church Society</b>                         |                                                                                         |                        |                     |
| 3. State of Incorporation<br><b>R.I.</b>                                                                                                                                                                         |                    | 4. Brief description of the character of business conducted in Rhode Island<br><b>Religious - is a church</b> |                                                                                         |                        |                     |
| 5. Principal Office Address<br><b>1213 Putnam Pike, P.O. Box 148</b>                                                                                                                                             |                    |                                                                                                               | City<br><b>Chepachet</b>                                                                | State<br><b>RI</b>     | Zip<br><b>02814</b> |
| 6. List ALL officers (names and addresses) <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span>                                                                     |                    |                                                                                                               |                                                                                         |                        |                     |
| President Name<br><b>Clifford W. Brown, Jr.</b>                                                                                                                                                                  |                    |                                                                                                               | Vice-President Name                                                                     |                        |                     |
| Street Address<br><b>180 Brown Street</b>                                                                                                                                                                        |                    |                                                                                                               | Street Address                                                                          |                        |                     |
| City<br><b>Providence</b>                                                                                                                                                                                        | State<br><b>RI</b> | Zip<br><b>02906</b>                                                                                           | City                                                                                    | State                  | Zip                 |
| Secretary Name<br><b>Elsie Magowan</b>                                                                                                                                                                           |                    |                                                                                                               | Treasurer Name<br><b>Lois Boire</b>                                                     |                        |                     |
| Street Address<br><b>1201 Hartford Pike</b>                                                                                                                                                                      |                    |                                                                                                               | Street Address<br><b>John Steere Rd - P.O. Box 11</b>                                   |                        |                     |
| City<br><b>No. Scituate</b>                                                                                                                                                                                      | State<br><b>RI</b> | Zip<br><b>02857</b>                                                                                           | City<br><b>Chepachet</b>                                                                | State<br><b>RI</b>     | Zip<br><b>02814</b> |
| 7. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span> |                    |                                                                                                               |                                                                                         |                        |                     |
| Director Name<br><b>Clifford W. Brown, Jr.</b>                                                                                                                                                                   |                    |                                                                                                               | Director Name<br><b>Margaret INMAN</b>                                                  |                        |                     |
| Street Address<br><b>180 Brown St</b>                                                                                                                                                                            |                    |                                                                                                               | Street Address<br><b>The Courtyard 715 Putnam Pike Apt 209 Village at Waterman Lake</b> |                        |                     |
| City<br><b>Providence</b>                                                                                                                                                                                        | State<br><b>RI</b> | Zip<br><b>02906</b>                                                                                           | City<br><b>Greenville</b>                                                               | State<br><b>RI</b>     | Zip<br><b>02828</b> |
| Director Name<br><b>Tim Reiner</b>                                                                                                                                                                               |                    |                                                                                                               | Director Name                                                                           |                        |                     |
| Street Address<br><b>106 Douglas Hook Rd</b>                                                                                                                                                                     |                    |                                                                                                               | Street Address                                                                          |                        |                     |
| City<br><b>Chepachet</b>                                                                                                                                                                                         | State<br><b>RI</b> | Zip<br><b>02814</b>                                                                                           | City                                                                                    | State                  | Zip                 |
| 8. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.                                                                        |                    |                                                                                                               |                                                                                         |                        |                     |
| <b>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.</b>      |                    |                                                                                                               |                                                                                         |                        |                     |
| <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<br><b>Clifford W. Brown, Jr.</b>                                                                                                                                       |                    |                                                                                                               |                                                                                         | Date<br><b>6/16/16</b> |                     |
| Signature of Officer/Authorized Representative<br>                                                                           |                    |                                                                                                               |                                                                                         |                        |                     |

**FILED**

**MAIL TO:**

**Division of Business Services**

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

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