



**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. 000605261

2. Name of Corporation The New Era Center for Arts, Culture, and Worldview

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 519 SWITCH ROAD

City or Town: WOOD RIVER JUNCTION

State: RI

Zip: 02894

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 TEACH THE ARTS FROM A CHRISTIAN PERSPECTIVE/ WORLDVIEW TO ENCOURAGE/ASSIST CHRISTIAN ARTISTS TO WORK AT, EXCEL, AND EARN A LIVING FROM THEIR CRAFT TO RE-ESTABLISH THE CHURCH AS THE SOURCE FOR HIGH-QUALITY ART THAT EMBODIES TRUTH AND BEAUTY TO ENCOURAGE COMMUNITY INVOLVEMENT IN THE ARTS TO ENCOURAGE EXCELLENCE IN THE ARTS TO INTRODUCE THE COMMUNITY TO ART CREATED FROM A CHRISTIAN PERSPECTIVE/ WORLDVIEW TO EDUCATE THE CHURCH AND COMMUNITY ABOUT WORLDVIEWS AND HOW THEY INFLUENCE LIFE, ART, AND CULTURE TO SERVE THE CHURCH AND COMMUNITY THROUGH THE ARTS BY PROVIDING PROGRAMS, PERFORMANCE, AND THE LIKE THAT ENRICH LIFE.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
VICE PRESIDENT	JOHN AUGUSTINE SAVAGE JR	519 SWITCH RD WOOD RIVER JUNCTION, RI 02894 USA
DIRECTOR	JEANNE FARMER	699 CHURCH AVE WARWICK, RI 02889 USA
DIRECTOR	HEATHER LYNNE SAVAGE	519 SWITCH RD WOOD RIVER JUNCTION, RI 02894 USA
DIRECTOR	JOHN AUGUSTINE SAVAGE JR.	519 SWITCH RD WOOD RIVER JUNCTION, RI 02894 USA
DIRECTOR	WILLIAM WARREN NIEMI	30 IACUELE DR WAKEFIELD, RI 02879 USA
DIRECTOR	CHRISTIE MARIE REYNOLDS	150 HATCHERY BYPASS RD. NORTH KINGSTOWN, RI 02852 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

JOHN SAVAGE 519 SWITCH ROAD WOOD RIVER JUNCTION , RI 02894

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

Signed this 16 Day of August, 2016 at 3:33:20 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 JOHN A. SAVAGE
Signature of Authorized Person

Form No. 631
Revised 09/07