



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.

2016 SEP -6 PM 2:21  
RECEIVED  
SECRETARY OF STATE  
BUSINESS SERVICES DIV.

1. Entity ID Number <u>53110</u>		2. Exact name of the Corporation <u>Greater Providence Church of Christ</u>	
3. State of Incorporation <u>RI</u>		4. Brief description of the character of business conducted in Rhode Island <u>Religious</u>	
5. Principal Office Address <u>2 Ferncrest Blvd</u>		City <u>North Providence</u>	State <u>RI</u>
		Zip <u>02911</u>	
6. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <u>Lawrence Martineau</u>		Vice-President Name <u>David Sutherland</u>	
Street Address <u>134 Pineville Rd</u>		Street Address <u>360 Whipple Ave</u>	
City <u>Dayville</u>	State <u>CT</u>	City <u>Oakland</u>	State <u>RI</u>
Zip <u>06241</u>		Zip <u>02858</u>	
Secretary Name <u>Haven Starr</u>		Treasurer Name <u>Haven Starr</u>	
Street Address <u>2 Ferncrest Blvd</u>		Street Address <u>2 Ferncrest Blvd</u>	
City <u>No. Prov.</u>	State <u>RI</u>	City <u>No. Prov.</u>	State <u>RI</u>
Zip <u>02911</u>		Zip <u>02911</u>	
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 <u>Lawrence Martineau</u>		Director Name <u>David Sutherland</u>	
Street Address <u>134 Pineville</u>		Street Address <u>360 Whipple Ave</u>	
City <u>Dayville</u>	State <u>CT</u>	City <u>Oakland</u>	State <u>RI</u>
Zip <u>06241</u>		Zip <u>02858</u>	
Director Name <u>Haven Starr</u>		Director Name	
Street Address <u>2 Ferncrest Blvd</u>		Street Address	
City <u>No. Prov.</u>	State <u>RI</u>	City	State
Zip <u>02911</u>		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 <u>Haven Starr / Sec. - Treasurer</u>			Date <u>9/6/2016</u>
Signature of Officer/Authorized Representative <u>Haven Starr</u> SIGN DOCUMENT HERE			

FILED

SEP 06 2016

By 282853

MAIL TO:  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: www.sos.ri.gov

FORM 631 - Revised: 05/2016