



**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. 000120169

2. Name of Corporation CHRIST APOSTOLIC CHURCH W.O.S.E.M. Rhode Island Branch

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 311 PRAIRIE AVENUE

City or Town: PROVIDENCE

State: RI

Zip: 02905

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

CHURCH FOR THE COMMUNITY, BIBLE READING, TEACHING

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	T.O. OBADARE	313 PRAIRIE AVENUE PROVIDENCE, RI 02905 USA
PASTOR	AYODEJI ADELEKE	999 CHARLES ST PROVIDENCE, RI 02904 USA
DIRECTOR	OWOLABI OLOWOOKERE	92 FARM STREET

		WOONSOCKET, RI 02895 USA
DIRECTOR	OLUSEYI AKANJI	19 JASON DRIVE LINCOLN, RI 02865 USA
DIRECTOR	AKIN AKANJI	292 ACADEMY AVENUE PROVIDENCE, RI 02908 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

PASTOR ABRAHAM OBADARE 311 PRAIRIE AVENUE PROVIDENCE , RI 02905

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

Signed this 14 Day of December, 2016 at 3:50:32 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 AKINAKANJI
Signature of Authorized Person

Form No. 631
Revised 09/07