



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

Annual Report for the year:  
Non-Profit Corporation2017

→ 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 26346		2. Exact name of the Corporation DUNN'S CORNERS COMMUNITY CHURCH (PRESBYTERIAN)			
3. State of Incorporation R.I.		5. Brief description of the character of business conducted in Rhode Island RELIGIOUS ORGANIZATION			
4. NAICS Code 83110					
6. Principal Office Address 221 POST ROAD,		City WESTERLY	State RI	Zip 02891	
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name GLEN BERWICK		Vice-President Name LAURIE BERRY			
Street Address 13 BRAHMS ROAD		Street Address 20 BRACKEN HILL COURT			
City WESTERLY	State RI	Zip 02891	City CAROLINA	State RI	Zip 02812
Secretary Name MARTHA HOSP		Treasurer Name JENNIFER CLAYS			
Street Address 12 WAXCADOWA AVE		Street Address 15 PIEZZO DR			
City WESTERLY	State RI	Zip 02891	City WESTERLY	State RI	Zip 02891
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name DAVID CAPALDI		Director Name SUSAN OGLE			
Street Address 148 SUNSET DRIVE		Street Address 36 HIGHLAND RD			
City CHARLESTOWN	State RI	Zip 02813	City CHARLESTOWN	State RI	Zip 02813
Director Name SAMANTHA PAUL		Director Name			
Street Address 10 SUNNYSIDE DRIVE		Street Address			
City WESTERLY	State RI	Zip 02891	City	State	Zip
9. 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>					
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.					
Name of Officer/Authorized Representative Glen W. Berwick				Date 5/27/17	
Signature of Officer/Authorized Representative Glen W. Berwick					

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

FILED

JUN 05 2017

BY