RI SOS Filing Number: 201744873170 Date: 6/5/2017 4:00:00 PM

| State Of Contract |
|-------------------|
|                   |
| I WALT            |
|                   |
| ~ /               |

State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

Annual Report for the year: 2017

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  | 2. Exact name of the Corporation |   |  |                                |                             |  |
|--|----------------------------------|---|--|--------------------------------|-----------------------------|--|
| 507875   | Firm Foundation RI Ministries    |   |  |                                |                             |  |
| 3. State of Incorporation  | 5. Brief descri                  | 5. Brief description of the character of business conducted in Rhode Island |  |                                |                             |  |
| Rhode Island   | We exist to                      | We exist to proclaim and promote the Christian gospel through the church.   |  |                                |                             |  |
| 4. NAICS Code  | 7                                | •   |  | <u> </u>                       | , •••                       |  |
| 813110 (Church)  | )                                |   |  |                                |                             |  |
| 6. Principal Office Address  |                                  |   | City                                     | State                          | Zip                         |  |
| 2361 Mendon Road   |                                  |   | Woonsocket                               | RI                             | 02895                       |  |
| 7. List ALL officers (names and ad                                     |                                  |   |  | neck the box to indicate       | an attachment               |  |
| President Name James Moriello  |                                  |   | Vice-President Name Susan Moriello       |                                |                             |  |
| Street Address 2361 Mendon Road  |                                  |   | Street Address 2361 Mendon Road          |                                |                             |  |
| City Woonsocket  | State RI                         | <sup>Zip</sup> 02895  | City Woonsocket                          | State RI                       | <sup>Zip</sup> <b>02895</b> |  |
| Secretary Name Tanya Hay   |                                  |   | Treasurer Name Tanya Hay                 |                                |                             |  |
| Street Address 12 Sunset Avenue  |                                  |   | Street Address 12 Sunset Avenue          |                                |                             |  |
| <sup>City</sup> Woonsocket   | State RI                         | <sup>Zip</sup> 02895  | City Woonsocket                          | State RI                       | <sup>Zip</sup> <b>02895</b> |  |
| 8. List ALL directors (names and a                                     | ddresses). RI Co                 | orporations MUST I  | ist at least THREE directors.            | Check the box to indic         | cate an attachment          |  |
| Director Name James Moriello   |                                  |   | Director Name Susan Moriello             |                                |                             |  |
| Street Address 2361 Mendon Road  |                                  |   | Street Address 2361 Mendon Road          |                                |                             |  |
| City Woonsocket  | State RI                         | <sup>Zip</sup> 02895  | City Woonsocket                          | State RI                       | <sup>Zip</sup> 02895        |  |
| Director Name Tanya Hay  |                                  |   | Director Name Scott Lanctot              |                                |                             |  |
| Street Address 12 Sunset Avenue  |                                  |   | Street Address 17 Jencks Road            |                                |                             |  |
| City Woonsocket  | State RI                         | <sup>Zip</sup> <b>02895</b>   | City Cumberland                          | State RI                       | <sup>Zip</sup> <b>02864</b> |  |
| 9. Registered Agent in Rhode Islar                                     |                                  |   |  |                                |                             |  |
| Under penalty of perjury, I declar<br>statements, and that all stateme |                                  |   |  | ccompanying schedu             | ules and                    |  |
| This report must be signed by either the Pres                          |                                  | t, Secretary, Assistant Si  | ecretary, Treasurer, duly Authorized Rep | oresentative, Receiver or Trus | itee.                       |  |
| Name of Officer/Authorized Repres<br>James Moriello                    | sentative                        |   |  | Date 6/1/2017                  | FILED                       |  |
| Signature of Officer/Authorized Rep                                    | resentative                      | ( auxili  | o cic                                    |                                | IN 05 1917                  |  |

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov Additional Director: James Landry, aa Aubin Street, Seekonk, MA 02771