



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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 R.I. DEPT. OF STATE
 BUS. SVCS. DIV.
 2017 JUN 14 AM 10:09

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 157128		2. Exact name of the Corporation The WAY OF LIFE KOREAN PRESBYTERIAN CHURCH	
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island RELIGIOUS SERVICE	
4. NAICS Code 813110			
6. Principal Office Address <i>New Address</i> 251 Magnolia St.		City Cranston	State RI
		Zip 02910	
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Young Joo Woo		Vice-President Name DONG IL Lee	
Street Address 159 Waterwheel LN.		Street Address 28 Hummingbird LN.	
City North Kingstown	State RI	Zip 02852	City Cranston
			State RI
			Zip 02921
Secretary Name Jae H Yoon		Treasurer Name Jae H Yoon	
Street Address 1 CRESTWOOD DR		Street Address 1 CRESTWOOD DR	
City Richmond	State RI	Zip 02832	City Richmond
			State RI
			Zip 02832
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>			
Director Name DONG IL Lee		Director Name Young Joo Woo	
Street Address 28 Hummingbird LN.		Street Address 159 Waterwheel LN.	
City Cranston	State RI	Zip 02921	City N. Kingstown
			State RI
			Zip 02852
Director Name Jae H Yoon		Director Name	
Street Address 1 Crestwood DR		Street Address	
City Richmond	State RI	Zip 02832	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.			
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.			
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>			
Name of Officer/Authorized Representative Jae Yoon			Date 6.12.17
Signature of Officer/Authorized Representative <i>Jae Yoon</i>			FILED

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
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 BY 305975
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