

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year:	1 0/10
Non-Profit Corporation	2017

→ 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						
695941	LoveRI						
State of Incorporation	5. Brief des	Brief description of the character of business conducted in Rhode Island					
Ri		To pray and work together with SE NE Churches to pray, care and share the good news of Jesus					
4. NAICS Code	Christ.						
813110 - Religious Organizat							
6. Principal Office Address			City	State	Zip		
30 Echo Lane			Cranston	RI	02921		
7. List ALL officers (names and	addresses)		CI	heck the box to indica	te an attachment		
President Name Peter Atkin			Vice-President Name George Barclay				
Street Address 61 Exeter Rd.		Street Address 48 Budlong Ave.					
City North Kingstown	State RI	^{Zip} 02852	City Warwick	State RI	Zip 02888		
Secretary Name Allison Lugar		Treasurer Name Allison Lug	Treasurer Name Allison Lugar				
Street Address 1 Presidential Way		Street Address 1 Presidential Way					
^{City} Lincoln	State RI	Zip 0286 5	City Lincoln	State RI	Zip 02865		
8. List ALL directors (names and	addresses). RI	Corporations MUST	list at least THREE directors.	Charlesha harrian			
Director Name Dave Gadoury	<u>.</u>		Director Name Peter Atkin	Check the box to Ind	cate an attachment		
Street Address 30 Echo Lane		Street Address 61 Exeter Rd.					
City Cranston	State RI	^{Zip} 02921	City North Kingstown	State RI	Zip 02852		
Director Name George Barclay			Director Name Olivier Bala				
Street Address 48 Budlong Ave.		Street Address 63 Eleventh St.					
City Warwick	State RI	Zip 02888	City Providence	State RI	Zip 02906		
9. Registered Agent in Rhode Isl	and. This informat	ion is currently of reco	ord in the Department of State. Chan	ges require filing Form 6	4 1.		
Under penalty of perjury, I dec statements, and that all statem	lare and affirm ents contained	that I have examin herein are true an	ed this report, including any a	ccompanying sched	ules and		
This report must be signed by either the P				presentative, Receiver or Tru	stee.		
Name of Officer/Authorized Repr	esentative			Date			
Allison Lugar		<u> </u>		6 1	7/17		
ignature of Officer/Authorized R	epresentative	Kraine Mo	reseasura e a ciciper				
Lulu 2	500	ORANIJIA 	OVENTHERE PILES	1			

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov JUN 2 1 2017



Joining Hands. Loving People. Changing Lives. 30 Echo Lane, Cranston, RI 02921

Attachment to Non-profit Corporation Annual Report for the year 2017

Entity ID #: 695941; Entity Name: LoveRI

Item # 7: Directors

Jevon Chan 15 Oakbrook Court East Greenwich, RI 02818

Allison Lugar 1 Presidential Way Lincoln, RI 02865

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JUN 2 1 2017 # 19594