



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.

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1. Entity ID Number <u>001668752</u>		2. Exact name of the Corporation <u>End Time Church</u>	
3. State of Incorporation <u>RI</u>		5. Brief description of the character of business conducted in Rhode Island <u>Serving the needs of the community and Church Services.</u>	
4. NAICS Code			
6. Principal Office Address <u>1828 Westminister Street</u>		City <u>Providence</u>	State <u>RI</u>
		Zip <u>02909</u>	
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐			
President Name <u>Damulola Akinlaga</u>		Vice-President Name <u>Tunde Akinlaga</u>	
Street Address <u>1828 Westminister Street</u>		Street Address <u>1828 Westminister Street</u>	
City <u>Providence</u>	State <u>RI</u>	City <u>Providence</u>	State <u>RI</u>
Zip <u>02909</u>		Zip <u>02909</u>	
Secretary Name <u>Olufunke Akinlaga</u>		Treasurer Name <u>Helen Akinlaga</u>	
Street Address <u>1828 Westminister Street</u>		Street Address <u>1828 Westminister Street</u>	
City <u>Providence</u>	State <u>RI</u>	City <u>Providence</u>	State <u>RI</u>
Zip <u>02909</u>		Zip <u>02909</u>	
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment ☐			
Director Name <u>Helen Akinlaga</u>		Director Name <u>Damulola Akinlaga</u>	
Street Address <u>1828 Westminister Street</u>		Street Address <u>1828 Westminister Street</u>	
City <u>Providence</u>	State <u>RI</u>	City <u>Providence</u>	State <u>RI</u>
Zip <u>02909</u>		Zip <u>02909</u>	
Director Name <u>Olufunke Akinlaga</u>		Director Name <u>Tunde Akinlaga</u>	
Street Address <u>1828 Westminister Street</u>		Street Address <u>1828 Westminister</u>	
City <u>Providence</u>	State <u>RI</u>	City <u>Providence</u>	State <u>RI</u>
Zip <u>02909</u>		Zip <u>02909</u>	
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.			
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 <u>Helen Akinlaga</u>			Date <u>6/26/17</u>
Signature of Officer/Authorized Representative 			

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

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