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State of Rhode Island and Providence Plantations

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

Annual Report for the year: 2017
Non-Profit Corporation

RECEIVED R.I. DEPT. OF STATE BUS SVCS DIV

2017 JUN 28 AM 11: 19

→ 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				
156332	Church of the Apostles				
3. State of Incorporation	5. Brief description of the character of business conducted in Rhode Island				
Rhode Island	Church				
4. NAICS Code					
813110 - Religious Organizatio			<u> </u>		
6. Principal Office Address		. "	City	State	Zip
170 Fairview Avenue			Coventry	RI	02816-7504
7. List ALL officers (names and addresses)  Check the box to indicate an attachment					
President Name Stephen A. Gammon			Vice-President Name William E. Sexton		
Street Address 22 Weaver Hill Road			Street Address 125 Arnold Street		
City Coventry	State RI	<sup>Zip</sup> 02816	City Lincoln	State RI	<sup>Zip</sup> <b>02865</b>
Secretary Name Barbara Allegretti			Treasurer Name Robert L. Bickerstaff		
Street Address 31 Harmony Street			Street Address 17 Campbell Street		
City West Warwick	State RI	<sup>Zip</sup> 02893	City West Warwick	State RI	<sup>Zip</sup> <b>02893</b>
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors.  Check the box to indicate an attachment					
Director Name Stephen A. Gammon			Director Name William E. Sexton		
Street Address 22 Weaver Hill Road			Street Address 125 Arnold Street		
City Coventry	State RI	<sup>Zip</sup> <b>02816</b>	City Lincoln	State RI	<sup>Zip</sup> <b>02865</b>
Director Name Robert J. Geoffrey			Director Name Blessing Jacobs		
Street Address 42 Mountain Laurel Drive			Street Address 4980 North Main Street, Apartment 401		
City Cranston	State RI	<sup>Zip</sup> <b>02920</b>	<sup>City</sup> Fall River	State MA	<sup>Zip</sup> 02720
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				Date	
Robert L. Bickerstaff				6/27/2017	
Signature of Officer/Authorized Representative  Robert Z. Bickerstoff  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 JUN 28 2017

BY M 307083

## Attachment to Non-Profit Corporation Annual Report for the Year 2017

Corporate ID Number: 156332

Church of the Apostles

## Additional Directors:

Kathleen M. Kettle 3 Wolfe Court Coventry, RI 02816

Deborah M. Adams 4 Evergreen Court Coventry, RI 02816

Douglas A. Stomberg 39 Jonathan Road West Greenwich, RI 02817