



**State of Rhode Island and Providence Plantations  
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Non-Profit Corporation  
Annual Report**

*Filing Period: June 1 - June 30*

*In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2017

**1. Corporate ID No.** 000792734

**2. Name of Corporation** Rain of Freedom Church

**3. State of Incorporation**

State: RI

**ARTICLE III**

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

6

813110

**4. Corporate Address in Rhode Island**

No. and Street: 7 ESMOND STREET

City or Town: SMITHFIELD

State: RI

Zip: 02917

Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:

City or Town: State: Zip: Country:

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

TO SEEK TO GEBNERATE A BODY OF BELIEVERS IN OUR LORD JESUS CHRIST AND TO  
TEACH, TRAIN, AND EQUIP TO PROMOT THE WORD OF GOD ACCORDING TO  
MATTHEW 28:18-20 TO ALL PEOPLE AND AS A CHURCH TO GATHER TO PRAY, SHARE  
FELLOWSHIP, AND TO DO OUTREACH TO THE GREATER COMMUNITY

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**

**THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	REBECCA JENKINS	268 WATERMAN AVENUE SMITHFIELD, RI 02917 USA
TREASURER	SHIRLEY DUNCAN	41 ALLENSON AVENUE NORTH ATTLEBORO, MA 02703 USA
SECRETARY	DAVID MCGINN	164 GRAY STREET PROVIDENCE, RI 02909 USA
VICE PRESIDENT	JAMES TELLIER	19 OAKLAWN ROAD NORTH SMITHFIELD, RI 02896 USA
DIRECTOR	REBECCA L. JENKINS	288 WATERMAN AVENUE SMITHFIELD, RI 02917 USA
DIRECTOR	SHIRLEY DUNCAN	41 ALLENSON AVENUE SOUTH ATTLEBORO, MA 02703 USA
DIRECTOR	JAMES TELLIER	19 OAKLAWN ROAD NORTH SMITHFIELD, RI 02896 USA
DIRECTOR	JODY L. JENKINS	268 WATERMAN AVENUE SMITHFIELD, RI 02917 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER**  
**Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

ROBERT A. PERETTI, ESQ. 1536 WESTMINSTER STREET PROVIDENCE , RI 02909

**9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.**

**Signed this 30 Day of June, 2017 at 10:40:43 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.***

By REBECCA JENKINS  
Signature of Authorized Person

Form No. 631  
Revised 09/07