



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

Annual Report for the year:
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.

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R.I. DEPT. OF STATE
BUS SVCS DIV
2017 JUN 30 PM 4:23

1. Entity ID Number 28816		2. Exact name of the Corporation Christ Temple Inc			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Religious			
4. NAICS Code 813110					
6. Principal Office Address 122 Wadsworth St			City PROV	State RI	Zip 02907
7. List ALL officers (names and addresses). Check the box to indicate an attachment <input type="checkbox"/>					
President Name Rev Philip D. Ferrera			Vice-President Name Dea Philip Cooper		
Street Address 37 Marlborough Ave			Street Address 571 Manton Ave		
City PROV	State RI	Zip 02907	City PROV	State RI	Zip 02909
Secretary Name Sonni Ives			Treasurer Name Dea David Applegate		
Street Address 148 1/2 Linwood Ave			Street Address 22 Hemlock Ave		
City PROV	State RI	Zip 02907	City CRAN.	State RI	Zip 02910
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 Rev Philip D. Ferrera			Director Name Sonni Ives		
Street Address 37 Marlborough Ave			Street Address 148 1/2 Linwood Ave		
City PROV	State RI	Zip 02907	City PROV	State RI	Zip 02907
Director Name Dea David Applegate			Director Name		
Street Address 22 Hemlock Ave			Street Address		
City CRAN	State RI	Zip 02910	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.					
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 Rev Philip D. Ferrera				Date 6/30/17	
Signature of Officer/Authorized Representative Rev Philip D. Ferrera				FILED JUN 30 2017 BY 4307440 4:23	