



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.

1. Entity ID Number 27174		2. Exact name of the Corporation First Baptist Church Of Charlestown At Quonochontaug			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Church BAPTIST CHURCH			
4. NAICS Code 813110 - Religious Organiza <input type="checkbox"/>					
6. Principal Office Address 5073 Old Post Road			City Charlestown	State RI	Zip 02813
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Paula Moreau		Vice-President Name John Mackenzie			
Street Address 32 Old Depot Road		Street Address 17 Stenton Road			
City Hope Valley	State RI	Zip 02832	City Westerly	State RI	Zip 02891
Secretary Name Susan Perreault		Treasurer Name Nancy Gavitt			
Street Address 10 Chase Hill Road		Street Address 99 Beach Street			
City Ashaway	State RI	Zip 02804	City Westerly	State RI	Zip 02891
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 Jean Babcock		Director Name Barbara Coon			
Street Address 21 Powaget Avenue		Street Address 18 Billings Street			
City Charlestown	State RI	Zip 02813	City Pawcatuck	State CT	Zip 06379
Director Name Elaine Lewis		Director Name			
Street Address 1 Twig Drive		Street Address			
City Westerly	State RI	Zip 02891	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.					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative Nancy E. Gavitt - Treasurer				Date 7/10/17	
Signature of Officer/Authorized Representative <i>Nancy E. Gavitt - Treasurer</i>				FILED JUL 13 2017	

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

BY 4206

 FORM 9301 Revised: 06/2017