



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **2017**

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 870020		2. Exact name of the Corporation Power Life Charismatic Ministries International			
3. State of Incorporation Rhode Island		4. Brief description of the character of business conducted in Rhode Island To promote and propagate the Christian faith and to spread the Gospel of Jesus Christ as revealed through the Holy Scriptures by all means of communication, wether visual, verbal. or written; and to build up believers into Disciples and effective			
5. Principal office address 250 Wadsworth Street		City Providence	State RI	Zip 02909	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Daniel Dodd		Vice-President Name Bertha Dodd			
Street Address 53 Victory Street,		Street Address 53 Victory Street			
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
Secretary Name Bertha Dodd		Treasurer Name Greta Saint-Legar			
Street Address 53 Victory Street		Street Address 31 Covell Street			
City Cranston	State RI	Zip 02910	City Providence	State RI	Zip 02919
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Bishop Joseph Quainoo		Director Name Daniel Ofori			
Street Address 442 Sylvan Court		Street Address 315 East Ave Apt.7			
City Saunderstown	State RI	Zip 02860	City Pawtucket	State RI	Zip 02860
Director Name Frankie Ankoma		Director Name			
Street Address 315 East Ave Apt. 7		Street Address			
City Pawtucket	State RI	Zip 02860	City	State	Zip
8. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

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

FILED

File Date _____

AUG 21 2017

Check No _____

By: _____

BY 310632

FOR SECRETARY OF STATE USE ONLY

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.

[Signature] **8/18/17**
 Signature of Officer or Authorized Representative Date

Daniel Dodd
 Print or Type Name of Officer or Authorized Representative