



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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 SECRETARY OF STATE
 CORPORATIONS DIV.
 2017 DEC 26 PM 1:46
Annual Report for the year: 2016

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 <u>1149846</u>		2. Exact name of the Corporation <u>First Haitian Baptist Church</u>	
3. State of Incorporation <u>RI</u>		5. Brief description of the character of business conducted in Rhode Island <u>Religious Society Associated with and a member of The American Baptist Churches of RI</u>	
4. NAICS Code <u>813110</u>			
6. Principal Office Address <u>1275 Elmwood Ave</u>		City <u>Cranston</u>	State <u>RI</u> Zip <u>02920</u>
7. List ALL officers (names and addresses)		Check the box to indicate an attachment <input type="checkbox"/>	
President Name <u>Jean Miguel V Louis</u>		Vice-President Name <u>Pierre Luc Cordet</u>	
Street Address <u>163 Fruit Hill Ave</u>		Street Address <u>75 Clemence St</u>	
City <u>N. Providence</u>	State <u>RI</u> Zip <u>02911</u>	City <u>Cranston</u>	State <u>RI</u> Zip <u>02920</u>
Secretary Name <u>Eveline Louis</u>		Treasurer Name <u>Guillaume Cordet</u>	
Street Address <u>163 Fruit Hill Ave</u>		Street Address <u>75 Clemence St</u>	
City <u>N. Providence</u>	State <u>RI</u> Zip <u>02911</u>	City <u>Cranston</u>	State <u>RI</u> Zip <u>02920</u>
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 <u>Delance Jean</u>		Director Name <u>Pierre Luc Cordet</u>	
Street Address <u>159 Grove St #2</u>		Street Address <u>75 Clemence St</u>	
City <u>West Roxbury</u>	State <u>MA</u> Zip <u>02132</u>	City <u>Cranston</u>	State <u>RI</u> Zip <u>02920</u>
Director Name <u>Jean Miguel V Louis</u>		Director Name	
Street Address <u>163 Fruit Hill Ave</u>		Street Address	
City <u>N. Providence</u>	State <u>RI</u> Zip <u>02911</u>	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 <u>Jean Miguel Louis</u>		Date <u>12/26/2017</u>	
Signature of Officer/Authorized Representative <u>[Signature]</u>		SIGN DOCUMENT HERE 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

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