



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

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 SECRETARY OF STATE  
 CORPORATIONS DIV.  
 2018 MAY 23 PM 3:15

Annual Report for the year: 2018  
 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 <b>126356</b>		2. Exact name of the Corporation <b>The New Spiritual Enrichment Program</b>	
3. State of Incorporation <b>R.I.</b>		5. Brief description of the character of business conducted in Rhode Island <b>Religious Activity</b>	
4. NAICS Code <b>813110</b>			
6. Principal Office Address <b>76 Petteys Ave</b>		City <b>Provi.</b>	State <b>RI</b>
		Zip <b>02909</b>	
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input checked="" type="checkbox"/></span>			
President Name <b>Lauria Ward</b>		Vice-President Name <b>Jonice Ward</b>	
Street Address <b>76 Petteys Ave</b>		Street Address <b>76 Petteys Ave</b>	
City <b>Provi.</b>	State <b>RI</b>	City <b>Provi.</b>	State <b>RI</b>
Zip <b>02909</b>		Zip <b>02909</b>	
Secretary Name <b>Enura Woods</b>		Treasurer Name <b>Spencer Ward</b>	
Street Address <b>3804 Benhyme Verd.</b>		Street Address <b>76 Petteys Ave</b>	
City <b>Silver Spring</b>	State <b>MD</b>	City <b>Provi.</b>	State <b>RI</b>
Zip <b>20906</b>		Zip <b>02909</b>	
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name <b>Alice Martin</b>		Director Name <b>Jonice Ward</b>	
Street Address <b>180 Martin St.</b>		Street Address <b>76 Petteys Ave</b>	
City <b>E. Provi.</b>	State <b>RI</b>	City <b>Provi.</b>	State <b>RI</b>
Zip <b>02909</b>		Zip <b>02909</b>	
Director Name <b>Spencer Ward</b>		Director Name	
Street Address <b>76 Petteys Ave</b>		Street Address	
City <b>Provi.</b>	State <b>RI</b>	City	State
Zip <b>02909</b>		Zip	
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.			
<b>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.</b>			
<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 <b>Laura Ward</b>			Date <b>5/23/18</b>
Signature of Officer/Authorized Representative <i>[Signature]</i>			<b>FILED</b>
SIGN DOCUMENT HERE <b>MAY 23 2018</b>			

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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