



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

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 000111364		2. Exact name of the Corporation Treasures of Truth Ministries			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island Spiritual Articles			
4. NAICS Code 813110 - Religious Organization					
6. Principal Office Address 284 Centennial Street			City Burrillville	State Rhode Island	Zip 02859
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Robert R. Woods		Vice-President Name Samson R. Woods			
Street Address 284 Centennial Street		Street Address 284 Centennial Street			
City Burrillville	State RI	Zip 02859	City Burrillville	State RI	Zip 02859
Secretary Name NONE		Treasurer Name NONE			
Street Address NONE		Street Address NONE			
City NONE	State NONE	Zip NONE	City NONE	State NONE	Zip NONE
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 Robert R. Woods		Director Name Samson R. Woods			
Street Address 284 Centennial Street		Street Address 284 Centennial Street			
City Burrillville	State RI	Zip 02859	City Burrillville	State RI	Zip 02859
Director Name Lucille Sperduti		Director Name NONE			
Street Address 35 Coyle Street		Street Address NONE			
City Warwick	State RI	Zip 02886	City NONE	State NONE	Zip NONE
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 Robert R. Woods				Date June 2, 2018	
Signature of Officer/Authorized Representative <i>Robert R. Woods</i>				SIGN DOCUMENT HERE	

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

FILED

JUN 05 2018

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