



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2018

1. Corporate ID No. 001667109

2. Name of Corporation FRUIT OF LIFE HEALING MINISTRY, INC.

3. State of Incorporation

State: RI

ARTICLE III

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

6

813110

4. Corporate Address in Rhode Island

No. and Street: 896 NEWPORT AVENUE

APT # 2

City or Town: PAWTUCKET

State: RI

Zip: 02861

Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

ESTABLISH AND OVERSEE PLACES OF WORSHIP TEACH AND PREACH THE GOSPEL TO ALL PEOPLE CONDUCT EVERGELISTIC AND HUMANITARIAN OUTREACH LICENSE AND ORDAIN MINISTERS GOSPEL AND TO ALSO ENGAGE IN ACTIVITIES WHICH ARE NECESSARY SUITABLE OR CONVENIENT FOR THE ACCOMPLISHMENT OF THAT PURPOSE ALSO A 501C3

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	ALBERT F TAMBA	896 NEWPORT AVENUE APT # 2 PAWTUCKET , RI 02861 USA
SECRETARY	KENNETH RICHARDS MR	896 NEWPORT AVENUE APT # 2 PAWTUCKET , RI 02861 USA
DIRECTOR	MAGDALINE SMITH	896 NEWPORT AVENUE, APT 2 PAWTUCKET, RI 02861 USA
DIRECTOR	LAURA THOMAS	896 NEWPORT AVENUE APT # 2 PAWTUCKET , RI 02861 USA
DIRECTOR	SUSAN DICKERSON	896 NEWPORT AVENUE APT # 2 PAWTUCKET , RI 02861 USA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

CHRISTOPHER H. TAMBA 896 NEWPORT AVENUE, APT 2 PAWTUCKET , RI 02861

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

Signed this 18 Day of June, 2018 at 8:31:16 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By CHRISTOPHER H TAMBA
Signature of Authorized Person

Form No. 631
Revised 09/07

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