



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2018

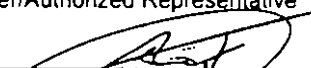
Non-Profit Corporation

→ Filing period: June 1 - June 30


→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

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SECRETARY OF STATE
CORPORATIONS DIV
2018 JUN 21 AM 11:41

1. Entity ID Number 502782		2. Exact name of the Corporation Unity Chapel	
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island A church that trains and equips men and women for Christian services.	
4. NAICS Code 813110			
6. Principal Office Address 16 Garrett Ave.		City Cranston	State RI
		Zip 02920	
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name / Rev. George S. Farley Sr. Founder		Vice-President Name / Min. McKinnis W. Farley Co-founder	
Street Address 74 portland street		Street Address 74 portland street	
City providence	State RI	City providence	State RI
Zip 02907		Zip 02907	
Secretary Name Cynthia B. Stewart		Treasurer Name Eleanor Beale	
Street Address 2 Elmira Ave.		Street Address 37 Cecil Street	
City North providence	State RI	City providence	State RI
Zip 02904		Zip 02909	
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 Rev. George S. Farley Sr.		Director Name Min. McKinnis W. Farley	
Street Address 74 portland street		Street Address 74 portland street	
City providence	State RI	City providence	State RI
Zip 02907		Zip 02907	
Director Name Cynthia B. Stewart		Director Name Eleanor Beale	
Street Address 2 Elmira Ave.		Street Address 37 Cecil Street	
City North providence	State RI	City providence	State RI
Zip 02904		Zip 02909	
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.			
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</small>			
Name of Officer/Authorized Representative Rev. George S. Farley			Date 6/21/18
Signature of Officer/Authorized Representative 			FILED
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

JUN 21 2018
BY  333208