



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

Annual Report for the year:
Non-Profit Corporation

2018

- Filing period: June 1 - June 30
→ Filing Fee: \$20.00
→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

2019 MAY - 7 PM 12:54
SECRETARY OF
CORPORATIONS

| | | | | | |
|--|--------------------|--|--|---------------------|---------------------|
| 1. Entity ID Number 107419 | | 2. Exact name of the Corporation The Church of God Pentecostal Standard Jehovah's | | | |
| 3. State of Incorporation RI | | 5. Brief description of the character of business conducted in Rhode Island Church | | | |
| 4. NAICS Code 813110 | | | | | |
| 6. Principal Office Address 48 Prescott St (Prescott) | | City Providence | State RI | Zip 02908 | |
| 7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/> | | | | | |
| President Name Agustina Marciano | | | Vice-President Name Basilio Marciano | | |
| Street Address 42 Edgemere Ave | | | Street Address 42 Edgemere Ave | | |
| City Providence | State RI | Zip 02909 | City Providence | State RI | Zip 02909 |
| Secretary Name | | | Treasurer Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| 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 Agustina Marciano | | | Director Name Basilio Marciano | | |
| Street Address 42 Edgemere Ave | | | Street Address 42 Edgemere Ave | | |
| City Providence | State RI | Zip 02909 | City Providence | State RI | Zip 02909 |
| Director Name Carmen Rivera | | | Director Name | | |
| Street Address 287 Manton Ave 2nd Fl | | | Street Address | | |
| City Providence | State RI | Zip 02909 | 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. | | | | | |
| <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 Agustina Marciano | | | | | Date |
| Signature of Officer/Authorized Representative Agustina Marciano | | | | | FILED |

MAY 07 2019 12:54
BY **KLNTGQZ**