



Department of State - Business Services Division

Annual Report for the year: **2019**  
 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.

**FILED**

JUN 07 2019 *ov*

BY 3163

1. Entity ID Number <b>31161</b>		2. Exact name of the Corporation <b>Seventh Day Baptist Missionary Society</b>			
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island <b>Distributor of Donations for International Ministries &amp; Missionary Logistics</b>			
4. NAICS Code <b>813110 - Religious Organ</b> <input type="checkbox"/>					
6. Principal Office Address <b>P.O. Box 156, 8A Church St, Second Floor</b>			City <b>Ashaway</b>	State <b>RI</b>	Zip <b>02804</b>
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Danny Lee</b>			Vice-President Name <b>Levi Bond</b>		
Street Address <b>820 W. Danforth Rd, #B29</b>			Street Address <b>12704 SE 110th Ct.</b>		
City <b>Edmond</b>	State <b>OK</b>	Zip <b>73012</b>	City <b>Clackamas</b>	State <b>OR</b>	Zip <b>97015</b>
Secretary Name <b>Kathleen A. Hughes</b>			Treasurer Name <b>Norman K. Burdick</b>		
Street Address <b>52 Lathrop Ave.</b>			Street Address <b>4331 Cecilia CT</b>		
City <b>Pawcatuck</b>	State <b>CT</b>	Zip <b>06379</b>	City <b>Riverside</b>	State <b>CA</b>	Zip <b>92503</b>
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Andrew Samuels</b>			Director Name <b>Miriam E. Berg</b>		
Street Address <b>2612 Arcadia Dr.</b>			Street Address <b>12956 Monaco Way</b>		
City <b>Miramar</b>	State <b>FL</b>	Zip <b>33023</b>	City <b>Thornton</b>	State <b>CO</b>	Zip <b>80602</b>
Director Name <b>Julianne Grove</b>			Director Name <b>Gary Chester</b>		
Street Address <b>51 High St.</b>			Street Address <b>60 Cross St</b>		
City <b>Ashaway</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>Westerly</b>	State <b>RI 0289</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>Cassandra N. Lawton</b>				Date <b>05/23/2019</b>	
Signature of Officer/Authorized Representative <i>Cassandra N. Lawton</i>				SIGN DOCUMENT HERE	