



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

**FILED**

JUN 20 2019 *2*

RV 5004

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.

1. Entity ID Number <b>28726</b>		2. Exact name of the Corporation <b>THE MOUNT PLEASANT BAPTIST CHURCH</b>			
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island <b>HOLDING RELIGIOUS SERVICES, CHRISTIAN EDUCATION AND MISSIONS</b>			
4. NAICS Code <b>813110 - Religious Organ</b> <input type="checkbox"/>					
6. Principal Office Address <b>262 ACADEMY AVE</b>			City <b>PROVIDENCE</b>	State <b>RI</b>	Zip <b>02908</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>Mr Dennis McAloon</b>		Vice-President Name <b>Ms. Maureen Morrissey</b>			
Street Address <b>16 Virio St</b>		Street Address <b>150 Dartmouth St Apt. B157</b>			
City <b>N. Providence</b>	State <b>RI</b>	Zip <b>02904</b>	City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>
Secretary Name <b>none</b>		Treasurer Name <b>Mrs. Janet Lawrence</b>			
Street Address		Street Address <b>178 Gray St</b>			
City	State	Zip	City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</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>Mr. Dennis McAloon</b>		Director Name <b>Ms. Maureen Morrissey</b>			
Street Address <b>16 Virio St</b>		Street Address <b>150 Dartmouth St. Apt B157</b>			
City <b>N. Providence</b>	State <b>RI</b>	Zip <b>02904</b>	City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>
Director Name <b>Mrs Janet Lawrence</b>		Director Name <b>none</b>			
Street Address <b>178 Gray St</b>		Street Address			
City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</b>	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.					
<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>Janet Lawrence</b>				Date <b>6/17/19</b>	
Signature of Officer/Authorized Representative <i>Janet Lawrence</i>					