



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

**FILED**

JUL 05 2019

BY

1335 DS

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>000137852</b>		2. Exact name of the Corporation <b>Wakefield Baptist Church</b>			
3. State of Incorporation <b>Rhode Island</b>		5. Brief description of the character of business conducted in Rhode Island <b>To introduce Jesus Christ to those who do not know and love Him</b>			
4. NAICS Code <b>813110 - Religious Organ</b>					
6. Principal Office Address <b>236 Main Street</b>		City <b>Wakefield</b>	State <b>RI</b>	Zip <b>02879</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>Walter Cole</b>		Vice-President Name <b>None</b>			
Street Address <b>1211A Shannock Rd.</b>		Street Address			
City <b>Charlestown</b>	State <b>RI</b>	Zip <b>02879</b>	City	State	Zip
Secretary Name <b>Julie Wardwell</b>		Treasurer Name <b>Jill McGuire</b>			
Street Address <b>251 Leisure Drive</b>		Street Address <b>101 Winchester Dr.</b>			
City <b>Wakefield</b>	State <b>RI</b>	Zip <b>02879</b>	City <b>Wakefield</b>	State <b>RI</b>	Zip <b>02879</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>J. Whitney Bancroft</b>		Director Name <b>Diane Paulhus</b>			
Street Address <b>51 Mellbridge Dr.</b>		Street Address <b>8B North Castle Way</b>			
City <b>Wakefield</b>	State <b>RI</b>	Zip <b>02879</b>	City <b>Charlestown</b>	State <b>RI</b>	Zip <b>02813</b>
Director Name <b>Carl Lindstrom</b>		Director Name			
Street Address <b>685 Tuckertown Rd.</b>		Street Address			
City <b>Wakefield</b>	State <b>RI</b>	Zip <b>02879</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>Jill McGuire</b>				Date <b>6/17/19</b>	
Signature of Officer/Authorized Representative <i>Jill McGuire</i>				SIGN DOCUMENT HERE	

MAIL TO:  
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 Website: www.sos.ri.gov