RI SOS Filing Number: 201904461700 Date: 7/12/2019 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

JUL 12 2019 (

Annual Report for the year:

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.

JUL 12 2019	(
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	T				J		
1. Entity ID Number 001671735	2. Exact name of the Corporation Providence County Church of Christ						
3. State of Incorporation	Brief description of the character of business conducted in Rhode Island						
RI	Religious organization - church						
4. NAICS Code	g	,	•				
813110 - Religious Organiza							
6. Principal Office Address			City	State	Zip		
2081 Diamond Hill Road			Cimberland	RI	02864		
7. List ALL officers (names and add	dresses)		<u> </u>	Check the box to indic	ate an attachment		
President Name	·		Vice-President Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Secretary Name	1	1	Treasurer Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
8. List ALL directors (names and ad	ddresses). RI Com	porations MUST lis	st at least THREE directors.	Check the box to indicate	ate an attachment		
Director Name Mohammes Malki			Director Name Osiris Gonzalez				
Street Address 80 Maplewood A	venue		Street Address 204 Nelson Street				
City Warwick	State RI	Zip 02889	City Providence	State RI	^{Zip} 02908		
Director Name Anyeli Saunders		•	Director Name Lance Walte				
Street Address 15 Hilltop Avenue)		Street Address 988 Pontiac Avenue				
City Providence	State RI	^{Zip} 02908	City Cranston	State RI	Zip 02920		
9. Registered Agent in Rhode Islan	d. This information i	s currently of record	in the Department of State. Change	es require filing Form 64	1.		
Under penalty of perjury, I declar statements, and that all statemen				companying schedu	iles and		
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.							
Name of Officer/Authorized Repres	Date	Date					
Osiris Gonzalez	7-1-19						
Signature of Officer/Authorized Representative 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

Providence County Church of Christ

8. Directors

Tonya Harris 130 Boylston Drive Cranston, R.I. 02921