



**State of Rhode Island and Providence Plantations  
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Non-Profit Corporation  
Annual Report**

Filing Period: June 1 - June 30

*In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2019

**1. Corporate ID No.** 000136643

**2. Name of Corporation** The Cathedral of Life Community Development Corporation

**3. State of Incorporation**

State: RI

**ARTICLE III**

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

6

813110

**4. Corporate Address in Rhode Island**

No. and Street: 1860 WESTMINSTER STREET

City or Town: PROVIDENCE

State: RI Zip: 02909 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:

City or Town: State: Zip: Country:

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

CREATE A NON-PROFIT BUSINESS DEVELOPMENT CENTER, CREATE A BANQUET/CONFERENCE CENTER, DEVELOP A HOMEOWNERSHIP/EDUCATION INITIATIVE, PRODUCT EDUCATION PROGRAMS TO TEACH YOUTH/ADULT LITERACY AND LIFE MANAGEMENT SKILLS

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**

**THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23**

| <b>Title</b>   | <b>Individual Name</b><br>First, Middle, Last, Suffix | <b>Address</b><br>Address, City or Town, State, Zip Code, Country |
|----------------|-------------------------------------------------------|-------------------------------------------------------------------|
| PRESIDENT      | JEFFERY WILLIAMS                                      | 1860 WESTMINSTER STREET<br>PROVIDENCE, RI 02909 USA               |
| TREASURER      | JOSE ENCARNACION                                      | 1860 WESTMINSTER STREET<br>PROVIDENCE, RI 02909 USA               |
| VICE PRESIDENT | LELANI WILLIAMS                                       | 1860 WESTMINSTER STREET<br>PROVIDENCE, RI 02909 USA               |
| DIRECTOR       | COLLIN BAILEY                                         | 1860 WESTMINSTER STREET<br>PROVIDENCE, RI 02909 USA               |
| DIRECTOR       | JEFFERY WILLIAMS                                      | 1860 WESTMINSTER ST<br>PROVIDENCE, RI 02909 USA                   |
| DIRECTOR       | LELANI WILLIAMS                                       | 1860 WESTMINSTER ST<br>PROVIDENCE, RI 02909 USA                   |
| DIRECTOR       | JOSE ENCARNACION                                      | 1860 WESTMINSTER ST<br>PROVIDENCE, RI 02909 USA                   |

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

REV. JEFFERY A. WILLIAMS 1860 WESTMINSTER STREET PROVIDENCE , RI 02909

**9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.**

**Signed this 30 Day of July, 2019 at 2:21:50 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.***

By LELANI WILLIAMS  
Signature of Authorized Person

Form No. 631  
Revised 09/07