



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

Annual Report for the year:

Non-Profit Corporation

2019

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

RECEIVED  
R.I. DEPT. OF STATE  
BUS SVCS DIV

2019 JUL 31 AM 10:58

1. Entity ID Number <b>001679808</b>		2. Exact name of the Corporation <b>Crossway Community Church</b>	
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island <b>Religious</b>	
4. NAICS Code <b>813110</b>			
6. Principal Office Address <b>1 Mohawk Ct.</b>		City <b>Westerly</b>	State <b>RI</b> Zip <b>02891</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>Robert Terranova</b>		Vice-President Name	
Street Address <b>1 Mohawk Ct</b>		Street Address	
City <b>Westerly</b>	State <b>RI</b>	City	State Zip
Secretary Name <b>Bethany Browne</b>		Treasurer Name <b>Brian Browne, Jr.</b>	
Street Address <b>6 Pinewoods Rd.</b>		Street Address <b>6 Pinewoods Rd.</b>	
City <b>N. Stonington</b>	State <b>CT</b>	City <b>N. Stonington</b>	State <b>CT</b> Zip <b>06359</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>Robert Terranova</b>		Director Name <b>Linda Terranova</b>	
Street Address <b>1 Mohawk Ct.</b>		Street Address <b>1 Mohawk Ct.</b>	
City <b>Westerly</b>	State <b>RI</b>	City <b>Westerly</b>	State <b>RI</b> Zip <b>02891</b>
Director Name <b>Brian Browne, Jr.</b>		Director Name <b>Bethany Browne</b>	
Street Address <b>6 Pinewoods Rd.</b>		Street Address <b>6 Pinewoods Rd.</b>	
City <b>N. Stonington</b>	State <b>CT</b>	City <b>N. Stonington</b>	State <b>CT</b> Zip <b>06359</b>
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.			
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.			
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 Representative <b>Brian M. Browne, Jr.</b>			Date <b>7/29/2019</b>
Signature of Officer/Authorized Representative 			

FILED

JUL 31 2019

BY

1166

VM