



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

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 SECRETARY OF STATE  
 CORPORATIONS DIV

Annual Report for the year: 2019  
 Non-Profit Corporation

2019 DEC 24 PM 2:08

- 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>000120169</b>		2. Exact name of the Corporation <b>Christ Apostolic church W.D.S.E.M Rhode Island Branch</b>			
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island <b>Church for the community, Bible reading and teaching</b>			
4. NAICS Code <b>813110</b>					
6. Principal Office Address <b>311 Prairie Ave</b>		City <b>Providence</b>	State <b>RI</b>	Zip <b>02905</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>T. D. OBadare</b>		Vice-President Name <b>None</b>			
Street Address <b>311 Prairie Ave</b>		Street Address			
City <b>Providence</b>	State <b>RI</b>	Zip <b>02905</b>	City	State	Zip
Secretary Name <b>Segun Omotayo</b>		Treasurer Name <b>Kehinde Adewemi</b>			
Street Address <b>441 Noonansquacket Ave</b>		Street Address <b>67 Columbus Ave</b>			
City <b>N. Providence</b>	State <b>RI</b>	Zip <b>02911</b>	City <b>N. Providence</b>	State <b>RI</b>	Zip <b>02911</b>
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Ayodeji Adeleke</b>		Director Name <b>Owolabi Olowookere</b>			
Street Address <b>999 Charles Street #3</b>		Street Address <b>99 Farm Street</b>			
City <b>N. Providence</b>	State <b>RI</b>	Zip <b>02904</b>	City <b>Woonsocket</b>	State <b>RI</b>	Zip <b>02895</b>
Director Name <b>Akin Akanji</b>		Director Name <b>Oluseji Akanji</b>			
Street Address <b>292 Academy Ave</b>		Street Address <b>19 Jason Drive</b>			
City <b>Providence</b>	State <b>RI</b>	Zip <b>02908</b>	City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865</b>
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>					
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</small>					
Name of Officer/Authorized Representative <b>Ayodeji Adeleke</b>				Date <b>12/24/19</b>	
Signature of Officer/Authorized Representative 				<b>FILED</b>	

DEC 24 2019

BY Chukwura MTT  
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MAIL TO:  
 Division of Business Services  
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