



NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 133086		2. Name of Corporation FIRST BAPTIST CHURCH OF WEST WARWICK			
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address 1613 MAIN STREET		City WEST WARWICK	Zip 02893 -
5. Foreign corporation. Enter principal office address			City	State	Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island CHURCH.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name MODERATOR DONALD HANSEN			Vice President Name NONE		
Street Address 12 FRIAR TUCK LANE #54			Street Address		
City COVENTRY	State RI	Zip 02816	City	State	Zip
Secretary Name CLERK NATALIE JOHNSON			Treasurer Name E. GLENN BRIGGS		
Street Address 101 QUAKER LANE			Street Address 5 FOUNTAIN ST.		
City WEST WARWICK	State RI	Zip 02893	City WEST WARWICK	State RI	Zip 02893
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name GARY MOORE			Director Name LYNNE GREENE		
Street Address 65 CLARK ROAD			Street Address 54 REBECCA ST.		
City COVENTRY	State RI	Zip 02816	City COVENTRY	State RI	Zip 02816
Director Name PAMELA MANSON			Director Name		
Street Address 51 DONNA DR.			Street Address		
City CRANSTON	State RI	Zip 02921	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78					
Agent Name PAMELA MANSON			Address		
Address 1613 MAIN STREET			City WEST WARWICK	Zip 02893	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



133086

File Date 6-8-05
Check No. 7135
By: EW
FOR SECRETARY OF STATE USE ONLY

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.

E. Glenn Briggs 6/6/05
Signature of Officer Date
E. GLENN BRIGGS
Print or Type Name of Officer
TREASURER
Title of Officer



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

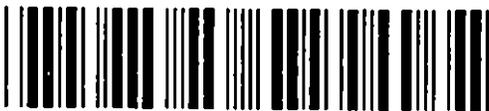
Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

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Street Address 51 DONNA DRIVE			Street Address		
City CRANSTON	State RI	Zip 02921	City	State	Zip
Secretary Name NONE			Treasurer Name GLENN BRIGGS		
Street Address			Street Address 5 FOUNTAIN ST		
City	State	Zip	City W. WARWICK	State RI	Zip 02893
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Street Address 65 CLARK RD			Street Address 51 REBECCA ST		
City COVENTRY	State RI	Zip 02816	City COVENTRY	State RI	Zip 02816
Director Name PAMELA MANSON			Director Name		
Street Address 51 DONNA DR			Street Address		
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9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78					
Agent Name PAMELA MANSON			Address		
Address 1613 MAIN STREET			City WEST WARWICK	Zip 02893	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 3 3 0 8 6 *

File Date **FILED**
Check No. JUL 14 2004
By: M37751
FOR SECRETARY OF STATE USE ONLY

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.

Pamela Manson 6/23/04
Signature of Officer Date
PAMELA MANSON
Print or Type Name of Officer
MODERATOR
Title of Officer