



State of Rhode Island

## Department of State - Business Services Division

Annual Report for the year: 2021

## 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.

FILED

JUN 17 2021

3408

1. Entity ID Number 28389		2. Exact name of the Corporation First Congregational Church of Warwick			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island we are a church			
4. NAICS Code 813110 - Religious Organization <input type="checkbox"/>					
6. Principal Office Address 715 Oakland Beach Ave			City Warwick	State RI	Zip 02889
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name C. Harry Edwards			Vice-President Name		
Street Address 70 Howie Ave			Street Address		
City Warwick	State RI	Zip 02888	City	State	Zip
Secretary Name Dianna Hall			Treasurer Name Richard Legge		
Street Address 29 Marjorie Lane			Street Address 56 Woodland Rd.		
City Warwick	State RI	Zip 02886	City E. Greenwich	State RI	Zip 02818
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 C. Harry Edwards			Director Name Johnathon Miller		
Street Address 70 Howie Ave			Street Address 83 Hermit Drive		
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 02889
Director Name Richard Legge			Director Name		
Street Address 56 Woodland Rd			Street Address		
City E. Greenwich	State RI	Zip 02818	City	State	Zip
9. The Registered Agent information of record with the RI Department of State is accurate. 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 Dianna Hall				Date 6-15-2021	
Signature of Officer/Authorized Representative Dianna Hall					

## MAIL TO:

Division of Business Services

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