



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.

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 R.I. DEPT. OF STATE
 BUS SVCS DIV

2021 JUN 29 P 12:11

1. Entity ID Number 000030069		2. Exact name of the Corporation Congdon Street Baptist Church			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island A place of public Christian Worship. A body of Christian Believers.			
4. NAICS Code 813110 - Religious Organizations					
6. Principal Office Address 17 Congdon Street			City Providence	State RI	Zip 02904
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Justin Lester			Vice-President Name None		
Street Address 23 Benedict Street			Street Address		
City North Providence	State RI	Zip 02906	City	State	Zip
Secretary Name None			Treasurer Name Gloria Price		
Street Address			Street Address 38 Central Ave		
City	State	Zip	City East Providence	State RI	Zip 02914
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Harold Metts			Director Name Dennis Price		
Street Address 31 Tanner St			Street Address 38 Central Ave		
City Providence	State RI	Zip 02907	City East Providence	State RI	Zip 02914
Director Name Paul Wesiah			Director Name None		
Street Address 191 Rutherglen Ave			Street Address		
City Providence	State RI	Zip 02907	City	State	Zip
9. The Registered Agent information of record with the RI Department of State is accurate. 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.					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative Justin R. Lester				Date 06/28/2021	
Signature of Officer/Authorized Representative					

FILED

JUN 29 2021

BY 05DIA A.A. 12:14 PM.