



Department of State - Business Services Division

Annual Report for the year:

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.

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

2021 JUL -9 AM 8:44

1. Entity ID Number 000028494		2. Exact name of the Corporation The Rector, Wardens + Vestry of the Chapel of St John the Divine	
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Church of Worship	
4. NAICS Code 813110 Religious Org.			
6. Principal Office Address 10 Churchway, PO Box 54		City Saunderstown	State RI Zip 02874
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Nancy Scheib		Vice-President Name Donald Hancham	
Street Address 21 Miner Rd		Street Address 243 Orchard Woods Drive	
City Saunderstown	State RI Zip 02874	City Saunderstown	State RI Zip 02874
Secretary Name Diane Sicchelli		Treasurer Name Palmer -	
Street Address 94 Plum Point Rd		Street Address Blaine Stickney II	
City Saunderstown	State RI Zip 02874	City Portsmouth	State RI Zip 02871
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 Jean Boweiman		Director Name Thomas Walsh	
Street Address 10 Enright Court		Street Address 138 Treasure Road	
City Exeter	State RI Zip 02822	City Narragansett	State RI Zip 02882
Director Name Kathy Blackburn		Director Name	
Street Address 207 Bunnet Shores Rd		Street Address	
City Narragansett	State RI Zip 02882	City	State Zip
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 Nancy L. Scheib Sr. Warden		Date 7/6/2021	
Signature of Officer/Authorized Representative Nancy L. Scheib		SIGN DOCUMENT HERE	

FILED

JUL 09 2021 8:47

BY CH PTHMWB