



**State of Rhode Island  
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Non-Profit Corporation  
Annual Report**

Filing Period: June 1 - June 30

*In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2021

**1. Corporate ID No.** 001709692

**2. Name of Corporation** Hands of Providence Christian Fellowship

**3. State of Incorporation**

State: RI

**ARTICLE III**

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

**4. Principal Office Address**

No. and Street: 40 WESTMINSTER STREET  
SUITE 700

City or Town: PROVIDENCE State: RI Zip: 02903 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:

City or Town: State: Zip: Country:

**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**

TO SHARE THE GOOD NEWS OF THE GOSPEL OF JESUS CHRIST THROUGH OUTREACH, MINISTRY, AND SERVICE TO UNDERGRADUATES FROM BROWN UNIVERSITY AND THE RHODE ISLAND SCHOOL OF DESIGN (RISD). TO UNDERTAKE SUCH ACTIVITIES THAT PROMOTE THE VERACITY, CONSISTENCY, AND BELIEVABILITY OF CHRISTIANITY AND THE BIBLE TO THE CAMPUS COMMUNITIES OF BROWN AND RISD; RAISE AND/OR CONTRIBUTE GIFTS OF CURRENT-USE DOLLARS, AND

DILIGENTLY SEEK OTHER CHRISTIAN DONORS TO DO SO AS WELL; AND OVERSEE THE BUDGETING, PERSONNEL, PROGRAMMING, AND OTHER USES OF THESE FUNDS IN A PRUDENT MANNER, CONSISTENT WITH THE BEST PRACTICES OF CHRISTIAN STEWARDSHIP.

**6. Names and Addresses of the Officers and Directors:**

**All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	JOANNE Y. PARK	40 DUNCAN LANE SKILLMAN, NJ 08558 USA
TREASURER	JULIE H. LEE	4156 DORSET PLACE LA CANADA, CA 91011 USA
SECRETARY	JAY J. PARK	40 DUNCAN LANE SKILLMAN, NJ 08558 USA
DIRECTOR	JOANNE Y PARK	40 DUNCAN LANE SKILLMAN, NJ 08558 USA
DIRECTOR	JULIE H LEE	4156 DORSET PLACE LA CANADA, CA 91011 USA
DIRECTOR	JAY J PARK	40 DUNCAN LANE SKILLMAN, NJ 08558 USA
DIRECTOR	CHESTER LEE	263 PARKWAY HARRINGTON PARK, NJ 07640 USA
DIRECTOR	JEFFREY YONG ESQ.	19240 ROMAR STREET NORTHRIDGE, CA 91324 USA
DIRECTOR	DENNY HUA	654 E. MARIA LANE TEMPE, AZ 85284 USA

**7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

J. RICHARD RATCLIFFE, ESQ. 40 WESTMINSTER STREET SUITE 700 PROVIDENCE , RI 02903

**8. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.**

**Signed this 19 Day of July, 2021 at 9:59:59 AM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.**

By J. RICHARD RATCLIFFE  
Signature of Authorized Person

