



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. 000091562

2. Name of Corporation Abundant Life Church Of God In Christ

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: 316 POCASSET AVENUE, UNIT 324

City or Town: PROVIDENCE

State: RI Zip: 02909 Country: USA

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

RELIGIOUS ACTIVITIES.

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.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	SHIRLEY ROBINSON	133 GALLATIN STREET PROVIDENCE, RI 02907 USA
VICE PRESIDENT	SHIRLEY BROWN	133 GALLATIN STREET

		PROVIDENCE , RI 02907 USA
DIRECTOR	SHARON MAXIE	18 WARREN AVENUE PAWTUCKET , RI 02860 USA
DIRECTOR	RODERICK JONES	95 MULBERRY STREET PAWTUCKET , RI 02860 USA
DIRECTOR	ANTHONY KING	17 GODDARD STREET PROVIDENCE , RI 02908 USA
DIRECTOR	SALLY KING	17 GODDARD STREET PROVIDENCE , RI 02908 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

SHIRLEY ROBINSON 133 GALLATIN STREET PROVIDENCE , RI 02907

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

Signed this 5 Day of October, 2021 at 10:25:24 PM 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 SHIRLEY ROBINSON
Signature of Authorized Person

Form No. 631
Revised 09/07

© 2007 - 2021 State of Rhode Island
All Rights Reserved