



**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: February 1 - May 1

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: 2022

1. Corporate ID No. 000030412

2. Name of Corporation St. Matthew-Trinity Evangelical Lutheran Church

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: 690 NEWPORT AVE
City or Town: PAWTUCKET State: RI Zip: 02861 Country: USA

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

TO CONDUCT CHRISTIAN WORSHIP SERVICES AND EDUCATIONAL PROGRAMS. WE ALSO SERVE TH ECOMMUNITY HOSTING A.A. &DCYF

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
TREASURER	LAURA ALMEIDA	10 MURPHY DR. CUMBERLAND, RI 02864 USA

SECRETARY	DANIELLE HODGES	61 BRENDA DR NORTHBRIDGE, MA 01534 USA
DIRECTOR	REBECCA MATUSZEK	137 CAMERON ST PAWTUCKET, RI 02861 USA
DIRECTOR	MARK PEARSON	10 POKANOKET TRAIL WARREN, RI 02885 USA
DIRECTOR	FRANK CICHON	223 BAYVIEW AVE BERKLEY, MA 02779 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**

LAURA ALMEIDA 690 NEWPORT AVENUE PAWTUCKET , RI 02861

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

Signed this 7 Day of February, 2022 at 1:37:17 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 LAURA C ALMEIDA
Signature of Authorized Person

Form No. 631
Revised 09/07

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