



**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. 000074814

2. Name of Corporation HAITIAN BAPTIST CHURCH OF RHODE ISLAND

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



813110

4. Principal Office Address

No. and Street: 12 LINCOLN AVENUE

City or Town: CRANSTON

State: RI

Zip: 02920

Country: USA

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

RELIGIOUS

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	MANUEL PERCY	10 GREENFIELD ST PAWTUCKET, RI 02861 US
TREASURER	JEAN WILFRID ALTERA	31 PRISCILLA AVENUE

		PROVIDENCE, RI 02909 USA
SECRETARY	MARGUERITE JOLICOEUR	8 MEADOW AVE NORTH PROVIDENCE, RI 02911 USA
DEACON	MARC PAUL DULCINE	204 HOME AVE PROVIDENCE, RI 02908 USA
DEACON	LATEL DULCINE	16 WATAUGA AVE NORTH PROVIDENCE, RI 02911 USA
DEACON	HOMERE DORSAINVILLE	185 PAVILION AVE PROVIDENCE, RI 02905 US
DIRECTOR	GABRIEL POGNON	301 OHIO AVENUE PROVIDENCE, RI 02905 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

MARGUERITE JOLICOEUR 8 MEADOW AVENUE NORTH PROVIDENCE , RI 02911

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

Signed this 31 Day of March, 2022 at 6:42:02 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 MARGUERITE A. JOLICOEUR
Signature of Authorized Person

Form No. 631
Revised 09/07

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