



**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. 001700988

2. Name of Corporation Slatersville Rhode Island Center for Spiritual Living Teaching Chapter

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: 411 CENTRAL ST.
City or Town: NORTH SMITHFIELD State: RI Zip: 02896 Country: USA

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

THE CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, EDUCATIONAL AND RELIGIOUS PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE.A NON PROFIT SPIRITUAL/RELIGIOUS EDUCATIONAL CENTER.

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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country

PRESIDENT	REV DR IAN TAYLOR	24 MAPLEWOOD PLACE SWEDESBORO, NJ 08085 USA
TREASURER	CHRISTIAN DEREZENDES	409 CENTRAL STREET NORTH SMITHFIELD, RI 02896 USA
SECRETARY	ELIZABETH CARDONA	11 OAKLAND AVENUE CRANSTON, RI 02910 USA
VICE PRESIDENT	NATALIA GLORIA DEREZENDES RSCP	411 CENTRAL STREET NORTH SMITHFIELD, RI 02896 USA
DIRECTOR	DR MARIA DINITTO	38 AMBERLY DRIVE CAROLINA, RI 02812 USA
DIRECTOR	CHRISTOPHER DUNNING	136 LAKEVIEW DRIVE CHEPACHET, RI 02814 USA
DIRECTOR	REV DR OGLA SILVA	HC-1 BOX 6602 VIEQUES, PR 00765 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**

NATALIA DEREZENDE 411 CENTRAL ST. SLATERSVILLE , RI 02876

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

Signed this 4 Day of May, 2022 at 6:02:36 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 IAN TAYLOR, PRESIDENT
Signature of Authorized Person

Form No. 631
Revised 09/07

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