



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. 001681769

2. Name of Corporation Forshia Ross Ministries

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: 156 SNAKE HILL RD

City or Town: GLENDALE

State: RI

Zip: 02826

Country: USA

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

TO PROVIDE HOPE AND RESOURCES THROUGH SPEAKING RADIO TELEVISION AND WORKSHOPS FOR THOSE SUFFERING WITH DEPRESSION AND LIFES ONGOING ISSUES

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
DIRECTOR	JOANNE JOBIN	411 WOODVALE AVENUE, 205G

		LAFAYETTE, LA 70503 US
DIRECTOR	FORSHIA ROSS	156 SNAKE HILL ROAD GLENDALE, RI 02826 USA
DIRECTOR	OLIVE KNIGHT	14 VERA ST DORCHESTER, MA 02124 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**

FORSHIA ROSS 156 SNAKE HILL ROAD GLENDALE , RI 02826

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

Signed this 21 Day of May, 2022 at 2:59:45 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 FORSHIA ROSS
Signature of Authorized Person

Form No. 631
Revised 09/07

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