



State of Rhode Island  
**Department of State - Business Services Division**

Annual Report for the year:  
**Non-Profit Corporation**

2022

- Filing period: June 1 - June 30
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by July 30.

RECEIVED  
 R.I. DEPT. OF STATE  
 BUS SVCS DIV

2023 JAN 04 3:25

1. Entity ID Number <b>792070</b>		2. Exact name of the Corporation <b>Journey Through Faith</b>			
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island			
4. NAICS Code <b>813110</b>		<b>Christian Community Center</b>			
6. Principal Office Address <b>31 Capital Street 3rd Floor</b>			City <b>Providence</b>	State <b>RI</b>	Zip <b>02860</b>
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Taylor J Britto</b>			Vice-President Name <b>Kenneth Milton Mallette Jr.</b>		
Street Address <b>282 Samuel Gorton Avenue</b>			Street Address <b>168 River Street</b>		
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02889</b>	City <b>Warwick</b>	State <b>RI</b>	Zip <b>02889</b>
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Jessica L Britto</b>			Director Name <b>John Gibson</b>		
Street Address <b>282 Samuel Gorton Avenue</b>			Street Address <b>180 Sunny Brook Dr.</b>		
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02889</b>	City <b>North Kingstown</b>	State <b>RI</b>	Zip <b>02852</b>
Director Name <b>Dean Isabella</b>			Director Name <b>Tannica Cerullo</b>		
Street Address <b>14 Westmoreland Street</b>			Street Address <b>97 Wesleyan Avenue</b>		
City <b>Narragansett</b>	State <b>RI</b>	Zip <b>02882</b>	City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
<b>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</b>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative <b>Taylor J Britto</b>					Date <b>1/4/2023</b>
Signature of Officer/Authorized Representative 					<b>FILED</b>

MAIL TO:  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

JAN 04 2023  
 BY DT BGA  
 AA. 3:26 PM